

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 THE COMMITTEE TO DEFEAT THE PRESIDENT

ADDRESS (number and street) 441 N LEE ST STE 205 ALEXANDRIA VA 22314-2301 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00544767 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR AMENDED (A)

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

5. Covering Period 01 / 01 / 2021 through 06 / 30 / 2021

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

Signature of Treasurer HARVEY, TED, , , [Electronically Filed] Date 07 / 28 / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

THE COMMITTEE TO DEFEAT THE PRESIDENT

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="375466.43"/>	<input type="text" value="375466.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="375466.43"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2366566.10"/>	<input type="text" value="2366566.10"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2742032.53"/>	<input type="text" value="2742032.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1520356.75"/>	<input type="text" value="1520356.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1221675.78"/>	<input type="text" value="1221675.78"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

THE COMMITTEE TO DEFEAT THE PRESIDENT

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	542322.78	542322.78
(ii) Unitemized	1614931.83	1614931.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2157254.61	2157254.61
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2157254.61	2157254.61
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	208286.49	208286.49
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1025.00	1025.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2366566.10	2366566.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2366566.10	2366566.10

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1271908.99	1271908.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1271908.99	1271908.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	145.00	145.00
24. Independent Expenditures (use Schedule E)	87243.76	87243.76
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	112844.44	112844.44
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	112844.44	112844.44
29. Other Disbursements (Including Non-Federal Donations).....	48214.56	48214.56
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1520356.75	1520356.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1520356.75	1520356.75

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2157254.61	2157254.61
34. Total Contribution Refunds (from Line 28(d))	112844.44	112844.44
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2044410.17	2044410.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1271908.99	1271908.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	208286.49	208286.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1063622.50	1063622.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 03 / 2021
Transaction ID : A34D287957D304B7ABAC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A7E7C7803C0854F18879
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A337CF85C2B864511925
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 7 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ABARA, CHINEDU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 CHESTNUT HILL RD N
 City ALBANY State NY Zip Code 12211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BASSETT MED CTR Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A808F5D83BE53449C9E2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ABBOTT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 SKYLINE BLVD.
 City RENO State NV Zip Code 89509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A42E9014A44BC479BA3F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ABBOTT, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 SKYLINE BLVD.
 City RENO State NV Zip Code 89509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A453BE9A6709243E6ACD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ABEL, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 NORTH AVE
 City WINTHROP HARBOR State IL Zip Code 60096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A34C03B178E834993B68
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ABORDO, SANDRA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11549 ROAD 248
 City PORTERVILLE State CA Zip Code 93257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A4CCC9599C2804D529DE
 Amount of Each Receipt this Period 300.00
 Memo Item

C. ABRAHAM, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 25123
 City ALBUQUERQUE State NM Zip Code 87125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A9826A35E2C474060B0B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ABRAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 655 THIRD AV
 City NEW YORK State NY Zip Code 10017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBEVILLE PRESS Occupation (for Individual) BOOK PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : A2901EA60E4CC4278BCC
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. ABRAMS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 655 THIRD AV
 City NEW YORK State NY Zip Code 10017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABBEVILLE PRESS Occupation (for Individual) BOOK PUBLISHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A264BDDDB284CC4CD9868
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ABREU, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1550 N 180TH DR
 City GOODYEAR State AZ Zip Code 85395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COGNIZANT Occupation (for Individual) CLAIMS ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A9EAE5CC0F0F43A6B54
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ABSHIRE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 282 DEER PARK DRIVE
 City RAYNE State LA Zip Code 70578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A84DA2E8C6B59455B8E4
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ACHBACH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 E DUBLIN GRANVILLE RD
 City WESTERVILLE State OH Zip Code 43081-9000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 16 / 2021
Transaction ID : A41D3C21069DB47D9901
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ACHBACH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 E DUBLIN GRANVILLE RD
 City WESTERVILLE State OH Zip Code 43081-9000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 27 / 2021
Transaction ID : A17FB76969E224E1B829
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ACHBACH, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3476 E DUBLIN GRANVILLE RD

City WESTERVILLE	State OH	Zip Code 43081-9000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2021

Transaction ID : AF1AD21D2404E4CAEA21

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 3476 E DUBLIN GRANVILLE RD

City WESTERVILLE	State OH	Zip Code 43081-9000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : A921438DF62864D0D8D3

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 3476 E DUBLIN GRANVILLE RD

City WESTERVILLE	State OH	Zip Code 43081-9000
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2021

Transaction ID : A528BB96B52DA4EB089D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 12 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ACHBACH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 E DUBLIN GRANVILLE RD
 City WESTERVILLE State OH Zip Code 43081-9000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 27 / 2021
Transaction ID : ACF26D3855EC143C7BF4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ACHBACH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 E DUBLIN GRANVILLE RD
 City WESTERVILLE State OH Zip Code 43081-9000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AAA1BB6D4238E49A4A8F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ACHBACH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 E DUBLIN GRANVILLE RD
 City WESTERVILLE State OH Zip Code 43081-9000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACHBACH AUTO INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AA497A06C43D943ED8AE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ADAMS, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 228 RAIL ROAD ST
 City MILTON State VT Zip Code 05468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENNETH R ADAMS INC Occupation (for Individual) CONSTRUCTION CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : A9A1E87A21A4D4F11801
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. ADAMS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 HWY 573
 City COMANCHE State TX Zip Code 76442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : A8D4E946A6D8B4F528E7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ADAMS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1300 HWY 573
 City COMANCHE State TX Zip Code 76442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2021
Transaction ID : AFD6C99ECC3BD444C903
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ADAMS, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 HWY 573

City COMANCHE	State TX	Zip Code 76442
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2021

Transaction ID : A869E9FD521304409A64

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1300 HWY 573

City COMANCHE	State TX	Zip Code 76442
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2021

Transaction ID : A5B9F10B7E1A149EF878

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1300 HWY 573

City COMANCHE	State TX	Zip Code 76442
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2021

Transaction ID : A0E203131F4134002B17

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ADENDORFF, JOHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 JALON ROAD
 City SCOTT State LA Zip Code 70583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A092F85F164CB4B59AA0
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ADENDORFF, JOHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 JALON ROAD
 City SCOTT State LA Zip Code 70583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A5A4914624D67418EA0C
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1460 UNIVERSITY AVE
 City SAN JOSE State CA Zip Code 95126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : A566D5F112705402684C
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ADREAN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18540 MARTINIQUE CT
 City VILLA PARK State CA Zip Code 92861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETINA CONSULTANTS OF ORANGE COUNTY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A3A5E7DCF43134C628F5
 Amount of Each Receipt this Period 45.00
 Memo Item

B. ADREAN, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18540 MARTINIQUE CT
 City VILLA PARK State CA Zip Code 92861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETINA CONSULTANTS OF ORANGE COUNTY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A5632E7DA4DF04CD0B94
 Amount of Each Receipt this Period 45.00
 Memo Item

C. AGGEN, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1190 BORDEAUX AVE
 City CAMARILLO State CA Zip Code 93010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A6D1E28201C1B4696AF9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 140.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AGGEN, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1190 BORDEAUX AVE
 City CAMARILLO State CA Zip Code 93010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A59BF6E2FF942471FBA0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. AGHAJI, CHIOGU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1274
 City MERCHANTVILLE State NJ Zip Code 08109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A9658FDB2D0B84FDBA2E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. AHEARN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 MARSH WREN LN
 City NAPLES State FL Zip Code 34105-2792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 03 / 2021
Transaction ID : A8367FB93CC9F45A1AE5
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AHEARN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 MARSH WREN LN
 City NAPLES State FL Zip Code 34105-2792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 05 / 2021**
Transaction ID : A08BF42C8E2C14560A65
 Amount of Each Receipt this Period 50.00
 Memo Item

B. AHEARN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 MARSH WREN LN
 City NAPLES State FL Zip Code 34105-2792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt **02 / 19 / 2021**
Transaction ID : AF157D47B55264A65BA8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. AHEARN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 MARSH WREN LN
 City NAPLES State FL Zip Code 34105-2792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt **03 / 03 / 2021**
Transaction ID : AAA7C8A0750F34846B3B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AHEARN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 MARSH WREN LN
 City NAPLES State FL Zip Code 34105-2792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : A2F2B7BA5BFE44443824
 Amount of Each Receipt this Period 50.00
 Memo Item

B. AHEARN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 MARSH WREN LN
 City NAPLES State FL Zip Code 34105-2792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : ACFE77EFE6DAC4551BBF
 Amount of Each Receipt this Period 100.00
 Memo Item

C. AHEARN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1565 MARSH WREN LN
 City NAPLES State FL Zip Code 34105-2792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : AFD22559AAB584D069A6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AHEARN, GEORGE, , ,

Mailing Address 1565 MARSH WREN LN

City NAPLES State FL Zip Code 34105-2792

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2021

Transaction ID : **AA9E7809EBE3F4504A4C**

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1565 MARSH WREN LN

City NAPLES State FL Zip Code 34105-2792

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2021

Transaction ID : **A8579DA59815342E5BFB**

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1565 MARSH WREN LN

City NAPLES State FL Zip Code 34105-2792

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 810.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2021

Transaction ID : **A5C1874CE4F1E40489D0**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AHEARN, GEORGE, , ,

Mailing Address 1565 MARSH WREN LN

City NAPLES	State FL	Zip Code 34105-2792
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
835.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2021

Transaction ID : A30939A17306C48E2AFB

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1565 MARSH WREN LN

City NAPLES	State FL	Zip Code 34105-2792
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A70152762AF934F38A24

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1565 MARSH WREN LN

City NAPLES	State FL	Zip Code 34105-2792
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
985.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : A183EDD8FF2A74F7C822

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AHLBUM, JONATHAN, , ,

Mailing Address **660 NORTHWEST 49TH AVENUE**

City POMPANO BEACH	State FL	Zip Code 33063
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
01 / 27 / 2021

Transaction ID : A54B1B25975614224865

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address **660 NORTHWEST 49TH AVENUE**

City POMPANO BEACH	State FL	Zip Code 33063
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
02 / 05 / 2021

Transaction ID : AB7920286CA9C483F994

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address **660 NORTHWEST 49TH AVENUE**

City POMPANO BEACH	State FL	Zip Code 33063
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
02 / 21 / 2021

Transaction ID : A6C156771783D4287A33

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AHLBUM, JONATHAN, , ,

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH	State FL	Zip Code 33063
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2021

Transaction ID : A887919506B8E404C957

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH	State FL	Zip Code 33063
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2021

Transaction ID : A5B337177114C4E2292E

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH	State FL	Zip Code 33063
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2021

Transaction ID : A33FE76AB22C54ADA808

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AHLBUM, JONATHAN, , ,

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH	State FL	Zip Code 33063
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2021

Transaction ID : ACCC3B45D90EC4563AD/

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH	State FL	Zip Code 33063
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2021

Transaction ID : AB6649A2FEDED44B3F824

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH	State FL	Zip Code 33063
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE AGENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2021

Transaction ID : A5E50B3570E834255AD7

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 25 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 AHLBUM, JONATHAN, , ,

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH State FL Zip Code 33063

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

Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 640.00

Date of Receipt
 04 / 27 / 2021
Transaction ID : A3D4612C5B5BF4E94B74

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH State FL Zip Code 33063

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

Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 665.00

Date of Receipt
 05 / 11 / 2021
Transaction ID : AD30F8A5A9C8F4B7C997

Amount of Each Receipt this Period
 25.00

Memo Item

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

Mailing Address 660 NORTHWEST 49TH AVENUE

City POMPANO BEACH State FL Zip Code 33063

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

Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 690.00

Date of Receipt
 06 / 11 / 2021
Transaction ID : AF61123B5058A48D2876

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AITKEN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33538 ROSEWOOD CIRCLE
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **03 / 17 / 2021**
Transaction ID : A56280027AFD4456B82B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ALBERTSON, MARSHALL, S., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 CASCADE CREEK RD
 City SITKA State AK Zip Code 99835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : A4A42188155C64B54A48
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ALBERTSON, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6242 EAST THUNDERHEAD DRIVE
 City NORTH PLATTE State NE Zip Code 69101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 24 / 2021**
Transaction ID : A2DE7DC3D80CB488682A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALBERTSON, ROSALIE, , ,

Mailing Address 6242 EAST THUNDERHEAD DRIVE

City NORTH PLATTE	State NE	Zip Code 69101
----------------------	-------------	-------------------

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

Name of Employer (for Individual) GREAT PLAINS HEALTH	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

Transaction ID : AD6E16998105541DC929

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 6242 EAST THUNDERHEAD DRIVE

City NORTH PLATTE	State NE	Zip Code 69101
----------------------	-------------	-------------------

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

Name of Employer (for Individual) GREAT PLAINS HEALTH	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2021

Transaction ID : A720A132310F94821A8A

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 6242 EAST THUNDERHEAD DRIVE

City NORTH PLATTE	State NE	Zip Code 69101
----------------------	-------------	-------------------

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

Name of Employer (for Individual) GREAT PLAINS HEALTH	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2021

Transaction ID : A0676F6FD5EA84A758C4

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALBERTSON, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6242 EAST THUNDERHEAD DRIVE
 City NORTH PLATTE State NE Zip Code 69101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : A1027373B2F0240968D0
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ALBERTSON, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6242 EAST THUNDERHEAD DRIVE
 City NORTH PLATTE State NE Zip Code 69101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : AFE42BE20EA404A719EB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ALBERTSON, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6242 EAST THUNDERHEAD DRIVE
 City NORTH PLATTE State NE Zip Code 69101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **05 / 24 / 2021**
Transaction ID : A0668B49BD1E14C83BE7
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALBERTSON, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6242 EAST THUNDERHEAD DRIVE
 City NORTH PLATTE State NE Zip Code 69101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 31 / 2021
Transaction ID : AAA7A1C5B188D4352A37
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ALBERTSON, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6242 EAST THUNDERHEAD DRIVE
 City NORTH PLATTE State NE Zip Code 69101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A7CA9283BF44B4FC2A2B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ALBERTSON, ROSALIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6242 EAST THUNDERHEAD DRIVE
 City NORTH PLATTE State NE Zip Code 69101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A7F92344CD9BE4CABBAC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALEXANDER, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44920 SE PAGH RD.
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE, FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **02 / 27 / 2021**
Transaction ID : A5BC8A758215647FEAB9
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. ALEXANDER, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44920 SE PAGH RD.
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE, FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 26 / 2021**
Transaction ID : A6C7FB1AF7FD6497CBA0
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. ALEXANDER, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44920 SE PAGH RD.
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE, FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : AF91D4E1C43854EC5800
 Amount of Each Receipt this Period 2500.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALEXANDER, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44920 SE PAGH RD.
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE, FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 26 / 2021
Transaction ID : ACDC6860E27AA45FB83B
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. ALEXANDER, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44920 SE PAGH RD.
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE, FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AEC5BCA091E584114A0F
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. ALEXANDER, LANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 LONGTREE DRIVE
 City DAMASCUS State AR Zip Code 72039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRESENIUS Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AE370C95A104E4DF68A2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5035.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALEXANDER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5528 MIAMI ST
 City SOUTH BEND State IN Zip Code 46614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HVAC ENGINEERING INC Occupation (for Individual) MECH ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A5DBECC0E9B724886B74
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ALEXANDER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5528 MIAMI ST
 City SOUTH BEND State IN Zip Code 46614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HVAC ENGINEERING INC Occupation (for Individual) MECH ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A5EA98EEEE836481E8E4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ALHADDAD, SADEG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2915 PECAN WOOD DR
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT SUPPLY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AA359A2C268C44FD1825
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALL, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 954 E. SUTLIFF DR
 City TERRE HAUTE State IN Zip Code 47802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OIL PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AE1815311A84E4393A03
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ALLBERT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8222 WOODVIEW AVE
 City JOLIET State IL Zip Code 60431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A1E736CC3B8E440C0862
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ALLBERT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8222 WOODVIEW AVE
 City JOLIET State IL Zip Code 60431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AD8641F9CDC474A91B89
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLEN, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31322 STELLA LANE
 City TOMBALL State TX Zip Code 77375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AC317613FF2CD41A38AB
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ALLEN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36541 CHANTECLER RD
 City WINCHESTER State CA Zip Code 92596-9019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHUBACH Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A5139B30DE0AB49A7980
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ALLEN, GWYNDA, S., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26618 SOUTH EASTLAKE DR
 City CHANDLER State AZ Zip Code 85248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 17 / 2021
Transaction ID : ABD765E267AEF4C30B2A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 19 / 2021
Transaction ID : A3EC21656FAB948E0827
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2021
Transaction ID : A292CE5260720409AB98
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2021
Transaction ID : ADABCB6DF705045EA80D
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2021
Transaction ID : AAC7FBA8732C94046853
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A1D9F01E9FC614AE1933
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A0BB46671D80A45A69FD
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 37 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A3651AD7CF7D94A149DE
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt 05 / 22 / 2021
Transaction ID : AAA43A7225D7E422A61
 Amount of Each Receipt this Period 10.00
 Memo Item

C. ALLEN, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 WAKEFIELD CT.
 City EL PASO State TX Zip Code 79922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A56CEE1BDF41E4165B78
 Amount of Each Receipt this Period 10.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLEN, KARIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 922 DOCTOR JACK ROAD
 City CONOWINGO State MD Zip Code 21918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A224451F69FEE48FA99A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ALLEN, MERRIGALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 COBBLERS LANE
 City DALLAS State TX Zip Code 75287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AC13B8CD26E374590B0A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ALLEN, TIMOTHY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6003 FLAMINGO RD
 City CRESTVIEW State FL Zip Code 32539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PANHANDLE INSULATION Occupation (for Individual) INSULATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A7D4859610D7649FA825
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 39 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLISON, MARYANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 SHADOW DRIVE
 City SHELBYVILLE State TN Zip Code 37160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 29 / 2021**
Transaction ID : A2013CB6209144A3B843
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ALSTON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9381 EAST STOCKTON BLVD 212
 City ELK GROVE State CA Zip Code 95624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MTE, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 30 / 2021**
Transaction ID : A09213DADBD204BE39FF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ALSTON, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9381 EAST STOCKTON BLVD 212
 City ELK GROVE State CA Zip Code 95624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MTE, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : ACCA370186D144CA8BEB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMBROSE, JUDITH, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 NE 25 AVENUE
 City FORT LAUDERDALE State FL Zip Code 33308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 31 / 2021**
Transaction ID : AEE0F68C39EA647FC8B3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. AMBROSE, JUDITH, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 NE 25 AVENUE
 City FORT LAUDERDALE State FL Zip Code 33308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A652C792343FE4483AC9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **03 / 14 / 2021**
Transaction ID : A4AD630C7518941B2A02
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 41 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 23 / 2021
Transaction ID : A58E0F15382444D6C99D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 04 / 14 / 2021
Transaction ID : AC4156C3F21264CFD9AA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 04 / 23 / 2021
Transaction ID : A4B9B58A6BAE74DC7B95
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AD5DF09FD42E9450DBC4
 Amount of Each Receipt this Period 35.00
 Memo Item

B. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A53491368BF004EA1885
 Amount of Each Receipt this Period 50.00
 Memo Item

C. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ADA6D002D66BE44DBA18
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMBROSIO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 GROUSE LANE
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AC5AF699B57D944D2BA2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. AMELIO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21709 CAPPEL LN
 City FRANKFORT State IL Zip Code 60423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A3B9D501B0A6F4E37A81
 Amount of Each Receipt this Period 50.00
 Memo Item

C. AMELIO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21709 CAPPEL LN
 City FRANKFORT State IL Zip Code 60423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A193F9330AAA044D88BB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMELIO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21709 CAPPEL LN
 City FRANKFORT State IL Zip Code 60423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A54539B2741E74BE8A16
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. AMELIO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21709 CAPPEL LN
 City FRANKFORT State IL Zip Code 60423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AC764912D735A448D9E3
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. AMOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 WREN CIRCLE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A519C3722112248E1AE8
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 45 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 WREN CIRCLE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : A11BD0164C3284D968F9
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. AMOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 WREN CIRCLE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A353013C00B074DE3A3B
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. AMOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 WREN CIRCLE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : AC513672B0CF04D8E8C0
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 46 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 WREN CIRCLE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A912642D2C7144B7ABA1
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. AMOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 WREN CIRCLE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021
Transaction ID : A7A13203423294045B30
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. AMOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 WREN CIRCLE
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : ADD773C8A9F064653ADD
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AMUNDSON, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1217 ROTELLA ST
 City NEWBURY PARK State CA Zip Code 91320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AEC0EE7CCE88847B4A39
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ANDERSEN, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1876 POST OAK TRAIL
 City RESTON State VA Zip Code 20191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL GOVERNMENT Occupation (for Individual) RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AC3ADCC7266874121862
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ANDERSEN, EDWARD, M., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9833 BUBBLING BROOK CT
 City OVIEDO State FL Zip Code 32765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US POST OFFICE Occupation (for Individual) CLERK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 15 / 2021
Transaction ID : A35A16452450242728EC
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDERSEN, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10809 W. 7TH ST.
 City HEWITT State WI Zip Code 54441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AACB0AE01E8BC4C97897
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ANDERSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5405 CYPRESS CENTER DR
 City TAMPA State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABH Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 09 / 2021
Transaction ID : AFC68B812B884443AA6E
 Amount of Each Receipt this Period 250.00
 Memo Item

C. ANDERSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5405 CYPRESS CENTER DR
 City TAMPA State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABH Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 09 / 2021
Transaction ID : AA5A5B0FF69164B40A77
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 49 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDERSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5405 CYPRESS CENTER DR
 City TAMPA State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABH Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 09 / 2021
Transaction ID : A96A07D8CCE21446A9D4
 Amount of Each Receipt this Period 250.00
 Memo Item

B. ANDERSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5405 CYPRESS CENTER DR
 City TAMPA State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABH Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 09 / 2021
Transaction ID : A7C0D639F510F4EC5B82
 Amount of Each Receipt this Period 250.00
 Memo Item

C. ANDERSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5405 CYPRESS CENTER DR
 City TAMPA State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABH Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2021
Transaction ID : AFA13897825F5432FB5E
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDERSON, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5405 CYPRESS CENTER DR
 City TAMPA State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABH Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **06 / 09 / 2021**
Transaction ID : A1158C112F8E64CA2880
 Amount of Each Receipt this Period 250.00
 Memo Item

B. ANDERSON, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 POKER
 City UNDERHILL State VT Zip Code 05489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **02 / 19 / 2021**
Transaction ID : A4687F0C274494FE9BDF
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ANDERSON, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 POKER
 City UNDERHILL State VT Zip Code 05489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **03 / 19 / 2021**
Transaction ID : A20C3A23DF1114DCB854
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDERSON, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 POKER

City UNDERHILL	State VT	Zip Code 05489
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Date of Receipt
04 / 19 / 2021
Transaction ID : A4AA11F1049F244EC8E5
 Amount of Each Receipt this Period
100.00
 Memo Item

B. ANDERSON, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 POKER

City UNDERHILL	State VT	Zip Code 05489
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	

Date of Receipt
06 / 11 / 2021
Transaction ID : AA69E2DA6CB944E5C8F3
 Amount of Each Receipt this Period
25.00
 Memo Item

C. ANDERSON, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5601 E PASEO REMEDIOS

City TUCSON	State AZ	Zip Code 85750
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
05 / 26 / 2021
Transaction ID : A45ADDC7C148544A8A5C
 Amount of Each Receipt this Period
50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDERSON, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5601 E PASEO REMEDIOS
 City TUCSON State AZ Zip Code 85750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A299CB83C9D4F4553967
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ANDERSON, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1895 CASABLANCA LANE
 City LAS CRUCES State NM Zip Code 88005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A69E66A31E3044E2F86E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ANDERSON, ELSA MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5775 NORTON RD
 City VERNON CENTER State NY Zip Code 13477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AAE7F89A714084ECBB4F
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDERSON, ELSA, MARIE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5775 NORTON RD
 City VERNON CENTER State NY Zip Code 13477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 25 / 2021
Transaction ID : ABCAFC79BD0464B97A3F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ANDERSON, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 COOPERS HILL RD
 City GEORGETOWN State TX Zip Code 78633-2130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A551EA3C93EB34E4C9E7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ANDERSON, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 DEVONSHIRE DR 4
 City BREA State CA Zip Code 92821-6010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A32679D0466034E92818
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ANDERSON, RANDY, , ,

Mailing Address 335 DEVONSHIRE DR
4

City BREA State CA Zip Code 92821-6010

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
06 / 29 / 2021
Transaction ID : AECED154CBD414654A54

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ANDERSON, ROBERT, L, ,

Mailing Address 663 ELK SPRINGS DR

City GLENWOOD SPRINGS State CO Zip Code 81601

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

Name of Employer (for Individual) VEIN CLINICS OF AMERICA Occupation (for Individual) DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
06 / 04 / 2021
Transaction ID : A04E3FC5A56704B21B7D

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ANDERSON, ROBERT, L, ,

Mailing Address 663 ELK SPRINGS DR

City GLENWOOD SPRINGS State CO Zip Code 81601

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

Name of Employer (for Individual) VEIN CLINICS OF AMERICA Occupation (for Individual) DOCTOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
06 / 04 / 2021
Transaction ID : A704ED68DBA1F4DE79C8

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDERSON, ROBERT, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 663 ELK SPRINGS DR
 City GLENWOOD SPRINGS State CO Zip Code 81601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VEIN CLINICS OF AMERICA Occupation (for Individual) DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AAA11394664A042E1B85
 Amount of Each Receipt this Period 5.00
 Memo Item

B. ANDERSON, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8634 HIAWATHA RD
 City KANSAS CITY State MO Zip Code 64114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCCOY SALES Occupation (for Individual) COMMERCIAL QUOTES FOR PLUMB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AAFB6AF1D21524167899
 Amount of Each Receipt this Period 25.00
 Memo Item

C. ANDREWS, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12104 N OAK HILLS PKWY
 City BATON ROUGE State LA Zip Code 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) TV HOST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AC87FBB48022E4F058E9
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 56 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDREWS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2746 BREWER DR.
 City SIERRA VISTA State AZ Zip Code 85650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A0AAEC914D3C047F3B6E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ANDREWS, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 485 ESSEX ST
 City BEVERLY State MA Zip Code 01915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : ADACDB7DBF3404C84894
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ANDREWS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN RD
 City FRANKLIN State TN Zip Code 37069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : AF703BD0C4CA1473BA74
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANDREWS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 MORAN RD
 City FRANKLIN State TN Zip Code 37069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A56881764EF0D4CA3BEB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ANDROS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3651
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A23CBF5FEDBDF4F03A54
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ANDROS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3651
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A9A32E23CAA0342BB9D9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANONSEN, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6632 E LONESOME TRAIL
 City CAVE CREEK State AZ Zip Code 85331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARADISE VALLEY COMMUNITY COLLEGE Occupation (for Individual) COMMUNITY COLLEGE FACULTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A6AAFA954A1924721949
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ANONSEN, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6632 E LONESOME TRAIL
 City CAVE CREEK State AZ Zip Code 85331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARADISE VALLEY COMMUNITY COLLEGE Occupation (for Individual) COMMUNITY COLLEGE FACULTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A1CD2D392A4A444E982F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ANTAO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3681 FUNSTON CIR
 City MELBOURNE State FL Zip Code 32940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A6768421E49A844D9A98
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANTHONY, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 678 MOONRIDGE CIRCLE
 City GRAND JUNCTION State CO Zip Code 81505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A9CBFD8CA6D3F4744A15
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. APEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 159
 City VINEMONT State AL Zip Code 35179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APEL STEEL Occupation (for Individual) STEEL FABRICATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A2230F986AFD44616BF2
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. APEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 159
 City VINEMONT State AL Zip Code 35179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APEL STEEL Occupation (for Individual) STEEL FABRICATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A81712E1AF5AC4E9BA53
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ARAGONA, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2600 KENNEDY BLVD
 4E
 City JERSEY CITY State NJ Zip Code 07306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A6B477A388686411E9EA
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ARANEO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 484 CARPENTER PLACE
 City UNION State NJ Zip Code 07083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUMMIT FINANCIAL, LLC Occupation (for Individual) FINANCIAL PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 27 / 2021
Transaction ID : AC09C4AE8F377411A82B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 29 / 2021
Transaction ID : A560C8A16F8C743CFBF4
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 21 / 2021
Transaction ID : A249E3F89CD7B42C69ED
 Amount of Each Receipt this Period 500.00
 Memo Item

B. ARCHER, LYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SAINT PETERS WALK
 City SUGAR LAND State TX Zip Code 77479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 04 / 28 / 2021
Transaction ID : ACAB56DDFBDE843F5975
 Amount of Each Receipt this Period 300.00
 Memo Item

C. ARMSTRONG, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1882 CO RD 203
 City MC COMB State OH Zip Code 45858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AC100B3816A47440FA28
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	835.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 62 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ARNOLD, DEE, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 373
 City MOUNT HOPE State KS Zip Code 67108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A92B6522D033643DE93
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ARNOLD, THADDEUS, R, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ARNOLD DRIVE
 City ANDERSON State SC Zip Code 29621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2021
Transaction ID : A43D1F56B2C4A412AAF9
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ARNOLD, THADDEUS, R, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ARNOLD DRIVE
 City ANDERSON State SC Zip Code 29621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 16 / 2021
Transaction ID : AEFD7C1956DBC488E8AE
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 235.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 63 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ARNOLD, THADDEUS, R, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ARNOLD DRIVE
 City ANDERSON State SC Zip Code 29621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : AF7F700BDF9B0476CA78
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. ARNOLD, THADDEUS, R, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ARNOLD DRIVE
 City ANDERSON State SC Zip Code 29621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A69B3CC90B1C549D8807
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ARNOLD, THEODORE, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1091 ROSELAND ST.
 City REDDING State CA Zip Code 96003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A6F9094DD7BDB4F3D86C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 64 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ARNOLD, THEODORE, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1091 ROSELAND ST.
 City REDDING State CA Zip Code 96003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AADF6431B651B491DAD4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ARRINGTON, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 BASS RD
 City MACON State GA Zip Code 31210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : ACA739FDEB2C4479A8F7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ARRINGTON, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 250 BASS RD
 City MACON State GA Zip Code 31210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A4909ABDF86FC45758AA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ARTHUN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 E. SAPPHIRE LANE
 City SPOKANE State WA Zip Code 99208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A5809531717C74C40B02
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ARTHUN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 E. SAPPHIRE LANE
 City SPOKANE State WA Zip Code 99208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : ACB0B61B2A192449FAF4
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ASGARIMAJD, MORTEZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7107 RADNOR RD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A83A2F62551CE44669B0
 Amount of Each Receipt this Period
 200.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ASGARIMAJD, MORTEZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7107 RADNOR RD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 04 / 29 / 2021
Transaction ID : A208E56D709144962974
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ASHWORTH, BRENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50117
 City PROVO State UT Zip Code 84605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A57157B050B914DE8BB0
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ASHWORTH, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18405 N 14TH STREET
 City PHOENIX State AZ Zip Code 85022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 09 / 2021
Transaction ID : AE486480B66FA4131A09
 Amount of Each Receipt this Period 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 67 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ASHWORTH, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18405 N 14TH STREET
 City PHOENIX State AZ Zip Code 85022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A863BDCA9D8B64495871
 Amount of Each Receipt this Period 55.00
 Memo Item

B. ASHWORTH, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18405 N 14TH STREET
 City PHOENIX State AZ Zip Code 85022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A973CC778341B4FEB84F
 Amount of Each Receipt this Period 55.00
 Memo Item

C. ASSANTE, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 817 ACRI RD
 City MECHANICSBURG State PA Zip Code 17050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A1896E8C60B674522959
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 145.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ATKINSON, ELIAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 MERCY SPRINGS RD
 City LOS BANOS State CA Zip Code 93635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AB4AD4901728246F687B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ATKINSON, GERTRUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2912 BRIGHTON 12TH ST APT 1C
 City BROOKLYN State NY Zip Code 11235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 12 / 2021
Transaction ID : A4EEC7AB9732C43B4B9D
 Amount of Each Receipt this Period 75.00
 Memo Item

C. ATKINSON, GERTRUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2912 BRIGHTON 12TH ST APT 1C
 City BROOKLYN State NY Zip Code 11235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 12 / 2021
Transaction ID : A1E2CC7A665A849E68F2
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ATKINSON, GERTRUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2912 BRIGHTON 12TH ST
APT 1C

City BROOKLYN State NY Zip Code 11235

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021

Transaction ID : A6E2DD6F5D83243BCB5D

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address 2912 BRIGHTON 12TH ST
APT 1C

City BROOKLYN State NY Zip Code 11235

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021

Transaction ID : A16EC0CDB067F40308DD

Amount of Each Receipt this Period
75.00

Memo Item

C. ATKINSON, LORI, D., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1816 SE PARK CREST AVE

City VANCOUVER State WA Zip Code 98683

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021

Transaction ID : AA5E53B9918BA4F22893

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ATKINSON, LORI, D., MS,

Mailing Address **1816 SE PARK CREST AVE**

City VANCOUVER	State WA	Zip Code 98683
--------------------------	--------------------	--------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A50E8B1C9865A416FAA5

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ATKINSON, LORI, D., MS,

Mailing Address **1816 SE PARK CREST AVE**

City VANCOUVER	State WA	Zip Code 98683
--------------------------	--------------------	--------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A762DB1EEA6CF4B4EB09

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ATKINSON, LORI, D., MS,

Mailing Address **1816 SE PARK CREST AVE**

City VANCOUVER	State WA	Zip Code 98683
--------------------------	--------------------	--------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : AE5304852F0F64CE5894

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ATLASMAN, DMITRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6721 S. EASTERN AVE
 City LAS VEGAS State NV Zip Code 89119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A9A2A05E25C23473FA10
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ATLASMAN, DMITRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6721 S. EASTERN AVE
 City LAS VEGAS State NV Zip Code 89119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A56CB776EB364495C8D9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. AUDILETT, GORDON, D., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 292
 City THATCHER State AZ Zip Code 85552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 01 / 2021
Transaction ID : AA3B03415100549B6AE3
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 72 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AUDILETT, GORDON, D., MR,

Mailing Address P O BOX 292

City THATCHER State AZ Zip Code 85552

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
03 / 26 / 2021
Transaction ID : A218EB79B408C4DBCBC/

Amount of Each Receipt this Period
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. AUDILETT, GORDON, D., MR,

Mailing Address P O BOX 292

City THATCHER State AZ Zip Code 85552

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 26 / 2021
Transaction ID : AB6109A1907834FD19FE

Amount of Each Receipt this Period
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. AUDILETT, GORDON, D., MR,

Mailing Address P O BOX 292

City THATCHER State AZ Zip Code 85552

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
05 / 26 / 2021
Transaction ID : ADDF01B06BA514B1FAB3

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

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

FOR LINE NUMBER: PAGE 73 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AUDILETT, GORDON, D., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 292
 City THATCHER State AZ Zip Code 85552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A9B84AF1DF5454F963
 Amount of Each Receipt this Period 300.00
 Memo Item

B. AURIT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 47TH ST NE
 City BISMARCK State ND Zip Code 58503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GATEWAY PHARMACY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A35B706AAE257464082B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. AURIT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 47TH ST NE
 City BISMARCK State ND Zip Code 58503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GATEWAY PHARMACY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A60E6859C745342DAA42
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AURIT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 47TH ST NE
 City BISMARCK State ND Zip Code 58503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GATEWAY PHARMACY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2021
Transaction ID : AA003E84BCEF24256B59
 Amount of Each Receipt this Period 100.00
 Memo Item

B. AURIT, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4220 47TH ST NE
 City BISMARCK State ND Zip Code 58503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GATEWAY PHARMACY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A7E447EA35F8B416291B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. AUTENRIETH, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 GREENS WAY APT 511
 City JACKSONVILLE BEACH State FL Zip Code 32250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLS Occupation (for Individual) TRANSLATOR SPANISH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A05CB4D24BD244BE5B5D
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AUTREY, DOT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 PINEHURST DR
 City BRANDON State MS Zip Code 39047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A7394125853DC413DA81
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. AUTREY, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2316 MAPLE STREET
 City MORGAN CITY State LA Zip Code 70380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MER Occupation (for Individual) OILFIELD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : ABB7EDE6E665E49FB883
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. AVERILL, LUCY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 WEXFORD CT
 City CANTON State GA Zip Code 30115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2021
Transaction ID : A8735CCA5AF934591AF1
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 DEAN LANE
 City CARBON HILL State AL Zip Code 35549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A32D864095F384A8689F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. AVERY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 DEAN LANE
 City CARBON HILL State AL Zip Code 35549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A750CC94E9C744174B37
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD
 City BURNET State TX Zip Code 78611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2021
Transaction ID : A99BFB39460C04D71954
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 77 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD
 City BURNET State TX Zip Code 78611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2021
Transaction ID : A71C7E5E8257748B3ADC
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD
 City BURNET State TX Zip Code 78611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : AACBB3F50C8294AC09B8
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD
 City BURNET State TX Zip Code 78611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A3EFCF0AF36EA4A6D81D
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD

City BURNET	State TX	Zip Code 78611
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 04 / 27 / 2021
Transaction ID : AC887D0B4ACA4DB38D:

Amount of Each Receipt this Period
 100.00

Memo Item

B. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD

City BURNET	State TX	Zip Code 78611
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 05 / 25 / 2021
Transaction ID : A533B8299C1DD450998C

Amount of Each Receipt this Period
 100.00

Memo Item

C. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD

City BURNET	State TX	Zip Code 78611
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 850.00

Date of Receipt
 05 / 27 / 2021
Transaction ID : A4A324E80A5E747AF877

Amount of Each Receipt this Period
 100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AVERY, IVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 HANSFORD RD
 City BURNET State TX Zip Code 78611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A14119A06BA55497082C
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. AVERY, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3030 CIRCLE DR SW
 City ROANOKE State VA Zip Code 24018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A78BFAAB83960471C9AE
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. AVILES, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1829 HAVENWOOD DR
 City OCEANSIDE State CA Zip Code 92056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) TRANSPORTING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A794E49728F5F4A749D2
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 80 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AVILES, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1829 HAVENWOOD DR
 City OCEANSIDE State CA Zip Code 92056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) TRANSPORTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AF01BD3980259485F8F3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. AYSCUE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 MILE COURSE
 City WILLIAMSBURG State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A85903329305E42C184F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 18 / 2021
Transaction ID : AB713D0B6F2CF47B6B22
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 81 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 01 / 19 / 2021
Transaction ID : A52CBEA872D8E4B73BB6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 01 / 24 / 2021
Transaction ID : A2EA9AD12DAE44BC7AD6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 01 / 24 / 2021
Transaction ID : AE90B93757095453D91A
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 01 / 27 / 2021
Transaction ID : A5B67AABBF5234F34972
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 02 / 01 / 2021
Transaction ID : A7E81BAD531124045816
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 02 / 05 / 2021
Transaction ID : A945CE0CB676648DCB3F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 83 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 02 / 05 / 2021
Transaction ID : AC2F7668AAE31485EA9A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt 02 / 08 / 2021
Transaction ID : AF9529A5A5B2546BCA61
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt 02 / 18 / 2021
Transaction ID : A5B7E749568BB4524815
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 84 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 02 / 19 / 2021
Transaction ID : A0061F6413B374AF8B6A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt 02 / 24 / 2021
Transaction ID : A4263DCDD25034923B09
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 855.00

Date of Receipt 02 / 24 / 2021
Transaction ID : A0A65943EA15F4A229A3
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 890.00

Date of Receipt **02 / 27 / 2021**
Transaction ID : AD289A0019EFE4B6FB3A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 940.00

Date of Receipt **03 / 01 / 2021**
Transaction ID : A0FE635C8DE8D406D852
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : A4A93C84A42C94C03A92
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2021

Transaction ID : A1170F31C263249C28DE

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1090.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2021

Transaction ID : ACB7A5FA4866E437E860

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1140.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2021

Transaction ID : A78F7260538FA4C11BDB

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1175.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A36575BDD8A1F48D192D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A35FBE33F356649FEA35
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : AB557C47BD3CC40DE8AB
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 88 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1335.00

Date of Receipt **03 / 27 / 2021**
Transaction ID : AAF84062119734F7BB86
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1385.00

Date of Receipt **04 / 01 / 2021**
Transaction ID : A194711ADFBFB483F96C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1485.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : AE1B1464070974E10BDF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 89 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1485.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A992D62B1F2804B43B8F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1535.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A8ED21FE4F8CB40E0880
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1585.00

Date of Receipt 04 / 18 / 2021
Transaction ID : A5986CE1BE71A4070BB7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1620.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A0B4B1FECC19B4295AAF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1745.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A361955F9C3454A2AAF7
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1745.00

Date of Receipt 04 / 24 / 2021
Transaction ID : AA121CE8B58064948AAE
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1780.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : A917FE58D1F4343FB921
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1830.00

Date of Receipt **05 / 01 / 2021**
Transaction ID : A8193B01C20814DB292D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1930.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : A4D7F99A93298468E986
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1930.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2021

Transaction ID : A1A14880D48D345A3A79

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1980.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2021

Transaction ID : A60C1A0306CAF40728A8

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2030.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2021

Transaction ID : AD8C0B22130F043968DF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 93 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2065.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A9253411223674C4F886

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2190.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A4FBB51B16F61460EAF9

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2190.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A4F526686ABC04E07AB5

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 94 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2225.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : AEE388511323044CAB74
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2275.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : AF1C42A82B8C64D4D878
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2375.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : AD55E72578B5E4D619A7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : A14CAE9950FF64330A86

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

Transaction ID : A2653BFA7776E4BDC922

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 16000 PONTEVEDRA PL

City AUSTIN	State TX	Zip Code 78738
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2021

Transaction ID : A7F71188700604ECD8A8

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 96 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2510.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A93C424A51D304225A16
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2635.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A7D08D36A79A443C9866
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2635.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A45DAE50228A94FB2A8B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BABB, TERILYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16000 PONTEVEDRA PL
 City AUSTIN State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2670.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AF52A59E12C874074ABC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BABKOW, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 FRANKLIN DRIVE
 City MONTAUK State NY Zip Code 11954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMY COINTREAU USA Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A798683CF57BC49C18E9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BABKOW, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 FRANKLIN DRIVE
 City MONTAUK State NY Zip Code 11954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMY COINTREAU USA Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A14936AA04AF747E0B92
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BACE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7105 FIREFLY GREEN LN
 City ROSEVILLE State CA Zip Code 95747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A8A533448E2A44DCE855
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BACON, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 PARK LANE
 City ATHERTON State CA Zip Code 94027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EUREKA MGMT. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : ADEDD6489538F4D5A9AD
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BACON, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 PARK LANE
 City ATHERTON State CA Zip Code 94027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EUREKA MGMT. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A7396733804204CCEA06
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BACON, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4125 AUTUMN RIDGE CT
 City ARLINGTON State TX Zip Code 76016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AA147C21A08C74756ACE
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BAILEY, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16100 ORCA LN
 City RED BLUFF State CA Zip Code 96080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2021
Transaction ID : AC838009820424274972
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BAILEY, FARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 FRONT STREET
 City KLAMATH FALLS State OR Zip Code 97601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A4A1547435316484E9EF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAILEY, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 W ORCHARD
 City FREDERICKSBURG State TX Zip Code 78624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AC9FEB61D049242BD94B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BAILEY, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5330 SE BURNING TREE CIRCLE
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A8E1CD4D9A30D4824AAC
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BAILEY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 329 290TH ST
 City MORRILL State KS Zip Code 66515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : ACA3E2754E8564A7CB8C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 101 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAILEY, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 329 290TH ST
 City MORRILL State KS Zip Code 66515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A7BB8431F47554D67A99
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BAILEY, TERRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19335 FARM TO MARKET 3204
 City BROWNSBORO State TX Zip Code 75756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A8501E7E745B14EB1B89
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BAIRD, MINNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3742 ELLA LEE LANE
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : ACF7060C56B804FFE8F8
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAIRD, MINNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3742 ELLA LEE LANE
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A3327FF0B67BB43E581E
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BAISDEN, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4510 RUSHING ROAD
 City LAKELAND State FL Zip Code 33810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LRH Occupation (for Individual) NP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AA9C5EDA75DC148EDAF
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. BAKER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 NORTH WESTGATE ROAD
 City HARWICH State MA Zip Code 02645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A7665521C44B64DE8BBB
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAKER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 NORTH WESTGATE ROAD
 City HARWICH State MA Zip Code 02645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : AA48D4D520DD74E78B89
 Amount of Each Receipt this Period 15.00
 Memo Item

B. BAKER, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 GRACE CHAPEL RD, #324
 City BLUE EYE State MO Zip Code 65611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A60D379FC81824DC4824
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BAKER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95A SOUTH EASTHAM ST
 City EASTHAM State MA Zip Code 02642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PLUMBER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : A4BB7CAF43FD340A9A0C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAKER, THERESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 KETCH

City HILTON HEAD ISLAND	State SC	Zip Code 29928
----------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2021

Transaction ID : A8E5965E7FAB54171B15

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 7 KETCH

City HILTON HEAD ISLAND	State SC	Zip Code 29928
----------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2021

Transaction ID : ACC63E54895CF4EFC844

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 7817 9TH STREET N

City OAKDALE	State MN	Zip Code 55128
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2021

Transaction ID : AB16F24AA42C14F9282F

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 105 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BALDWIN, JASPER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 590
 City HUNT State TX Zip Code 78024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 01 / 2021
Transaction ID : A3F6C0391651E4A6CBA1
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BALDWIN, JASPER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 590
 City HUNT State TX Zip Code 78024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2021
Transaction ID : AEF884FA6644E48659E7
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. BALDWIN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6401 NORWOOD ROAD
 City KNOXVILLE State TN Zip Code 37914-9780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AF1AD82234BC4488AB71
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 106 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BALDWIN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3590 RIDGEWOOD PT
 City GAINESVILLE State GA Zip Code 30504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A77ABCAD8BD1B4316B27
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BALLAY, JEAN-PIERRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2314 BRIARWOOD BLVD
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : ABCC002170A2D41E2847
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BALLAY, JEAN-PIERRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2314 BRIARWOOD BLVD
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AE2F8E643B1704549863
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BALTER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 SUNSET AVE
 City VENICE State CA Zip Code 90291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A1DB73AF4755A49EB847
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BALTER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 SUNSET AVE
 City VENICE State CA Zip Code 90291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : AD392525F46B9431F88E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BALZER, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19764 MONTAUK DRIVE
 City SARATOGA State CA Zip Code 95070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BONNIE BALZER Occupation (for Individual) PATHOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AED81CC21651D4E86B32
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BALZER, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19764 MONTAUK DRIVE
 City SARATOGA State CA Zip Code 95070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BONNIE BALZER Occupation (for Individual) PATHOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A9BEA64883C4B4EA1AE5
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BANAHAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 E LOMA LANE
 City PHOENIX State AZ Zip Code 85020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEALTH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021
Transaction ID : A4167FB190EA54EAB860
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BANAHAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 E LOMA LANE
 City PHOENIX State AZ Zip Code 85020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEALTH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A3F71E71DF40A494788D
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BANAHAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 E LOMA LANE
 City PHOENIX State AZ Zip Code 85020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEALTH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A90F855BD5C544F278B2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BANAHAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 E LOMA LANE
 City PHOENIX State AZ Zip Code 85020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEALTH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A509D0345AE6547A7AD5
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BANKERS, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2887 HILTON CIR
 City KENNESAW State GA Zip Code 30152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A7ABDCFD73FB24DA3B17
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 110 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A17BAB022B49E43E9820
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A0BFFE55EDF8D425BB8C
 Amount of Each Receipt this Period 15.00
 Memo Item

C. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 13 / 2021
Transaction ID : A61581D3079BD40CAA06
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 111 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 04 / 17 / 2021
Transaction ID : AE22A945F10A14214BBE
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A47002199C477449CB0D
 Amount of Each Receipt this Period 15.00
 Memo Item

C. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A36334A22AB904E28BE8
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 17 / 2021
Transaction ID : AF43C824AFD524D52821
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A146D946C2767453A97D
 Amount of Each Receipt this Period 15.00
 Memo Item

C. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 13 / 2021
Transaction ID : ACD20AED3EB1B49A6A81
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A49E3AD5339F24BCA973
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARATT, CYRUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 WINTERSTONE DRIVE
 City LEWISVILLE State TX Zip Code 75067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOTAL INFORMATION SOLUTIONS Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A950357E734EA47158B0
 Amount of Each Receipt this Period 15.00
 Memo Item

C. BARBERINO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 HOLLY MAR HILL ROAD
 City NORTHFORD State CT Zip Code 06472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARBERINO BROS Occupation (for Individual) CAR DEALERSHIP OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A5BBCC52C8FAA4BBFAB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARBERINO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 HOLLY MAR HILL ROAD
 City NORTHFORD State CT Zip Code 06472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARBERINO BROS Occupation (for Individual) CAR DEALERSHIP OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A4019BC7C8A8542EB973
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BARBERINO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 HOLLY MAR HILL ROAD
 City NORTHFORD State CT Zip Code 06472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARBERINO BROS Occupation (for Individual) CAR DEALERSHIP OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A99AB09F255AF439DB22
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BARBERINO, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 HOLLY MAR HILL ROAD
 City NORTHFORD State CT Zip Code 06472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARBERINO BROS Occupation (for Individual) CAR DEALERSHIP OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AB417A6804D7B4B5BBE7
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARBER, MARY, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 144

City HAWKINS	State TX	Zip Code 75765
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2021

Transaction ID : A5DED5A94D2F34A16A79

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 7 BLANCHE STREET

City SADDLE BROOK	State NJ	Zip Code 07663
----------------------	-------------	-------------------

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

Name of Employer (for Individual) BARCIA BROS INC	Occupation (for Individual) CONTROLLER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2021

Transaction ID : AD51F694562D84FCDA76

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 7 BLANCHE STREET

City SADDLE BROOK	State NJ	Zip Code 07663
----------------------	-------------	-------------------

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

Name of Employer (for Individual) BARCIA BROS INC	Occupation (for Individual) CONTROLLER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2021

Transaction ID : A47586EA57A584150A11

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 116 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARCLAY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6589 SOUTHEAST 82ND STREET
 City TRENTON State FL Zip Code 32693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A53B5D577A2EA4B05B88
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BAREKMAN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1815 LAKEWOOD BLVD
 City EULESS State TX Zip Code 76039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A5BAF8202B886409F8A1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BAREKMAN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1815 LAKEWOOD BLVD
 City EULESS State TX Zip Code 76039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A3EF1F809425746D7B62
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 117 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARFIELD, CECIL, RONALD, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1007 WEST GORDON STREET
 City THOMASTON State GA Zip Code 30286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS, BARFIELD & BAITY, LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 16 / 2021**
Transaction ID : A15D541799EC44F43A83
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BARICKMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10170 W TROPICANA AVE 288
 City LAS VEGAS State NV Zip Code 89147-8465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 28 / 2021**
Transaction ID : AE2F3441BBD4F4751814
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BARKER, PATRICIA, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 N WOODROW ST
 City FUQUAY VARINA State NC Zip Code 27526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOB BARKER COMPANY Occupation (for Individual) CORPORATE SECRETARY
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : A52F45220028A47E4BB8
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1285.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 118 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARNES, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 CACTUS ST
 City WARWICK State RI Zip Code 02886-0609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A63175C1F6701481489E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARNES, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6191 OLD STUMP RD
 City GAYLORD State MI Zip Code 49735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A09C09EDDA7D54553BB2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BARNES, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6191 OLD STUMP RD
 City GAYLORD State MI Zip Code 49735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A1F250B596BAC4324B41
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 119 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

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

Mailing Address 312 CANDYLANE CIRCLE

City YUKON	State OK	Zip Code 73099
---------------	-------------	-------------------

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

Name of Employer (for Individual) ASRC FEDERA	Occupation (for Individual) ELECTRONICS ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2021

Transaction ID : A52BE8F5C7FCE4826884

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 312 CANDYLANE CIRCLE

City YUKON	State OK	Zip Code 73099
---------------	-------------	-------------------

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

Name of Employer (for Individual) ASRC FEDERA	Occupation (for Individual) ELECTRONICS ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

Transaction ID : A113311486AE340CE88D

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 312 CANDYLANE CIRCLE

City YUKON	State OK	Zip Code 73099
---------------	-------------	-------------------

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

Name of Employer (for Individual) ASRC FEDERA	Occupation (for Individual) ELECTRONICS ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2021

Transaction ID : A6649F2CB912546FE8ED

Amount of Each Receipt this Period
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARNETT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 312 CANDYLANE CIRCLE
 City YUKON State OK Zip Code 73099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASRC FEDERA Occupation (for Individual) ELECTRONICS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 12 / 2021
Transaction ID : AEB6BA2B2575B49BD808
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BARON, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 EAST HIGHLAND DRIVE
 City ZANESVILLE State OH Zip Code 43701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) AUTHOR/WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A44D04F651E074AF39E6
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BAROZINSKI, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 W 32ND PL
 City SAND SPRINGS State OK Zip Code 74063-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A04E6A463E8054738820
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 121 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAROZINSKI, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 W 32ND PL
 City SAND SPRINGS State OK Zip Code 74063-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AB1B7B9C21F01497BA20
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BARRACK, EVELYN IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST.
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2021
Transaction ID : ACB9983547E724AC6826
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BARRACK, EVELYN IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST.
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AECA70FD2504948318ED
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRACK, EVELYN IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST.
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A922EC9E53CF24479AFB
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BARRACK, EVELYN IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST.
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AC6758669728A4AD6A53
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BARRACK, EVELYN IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST.
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A9B6B3FF643B74A4FA9E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 01 / 21 / 2021
Transaction ID : A2986FECFB3F94B088FA
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 01 / 30 / 2021
Transaction ID : A6259FB4FAEAF46E8952
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 02 / 18 / 2021
Transaction ID : ACFF1E75B4BD24B5DB46
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 02 / 19 / 2021
Transaction ID : AB802DC499D0B47FC842
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 02 / 21 / 2021
Transaction ID : A9540CB9EC3354F2E915
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt 03 / 18 / 2021
Transaction ID : A11888C7CF1684F79BAC
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A8E99387235664B1DBE3
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 03 / 21 / 2021
Transaction ID : AF5F079B99A234D0E8FA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 04 / 18 / 2021
Transaction ID : AC0371D6777D64E53961
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 126 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRACK, EVELYN, IRENE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 781 WEED ST

City NEW CANAAN	State CT	Zip Code 06840
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2021

Transaction ID : AD51127FF23994263A9E

Amount of Each Receipt this Period

35.00

 Memo Item

B. BARRACK, EVELYN, IRENE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 781 WEED ST

City NEW CANAAN	State CT	Zip Code 06840
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
830.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2021

Transaction ID : AFEA70375DF444EFA55

Amount of Each Receipt this Period

35.00

 Memo Item

C. BARRACK, EVELYN, IRENE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 781 WEED ST

City NEW CANAAN	State CT	Zip Code 06840
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
930.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2021

Transaction ID : AC250769FD2634578A42

Amount of Each Receipt this Period

100.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 965.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A3C17DEE196AD4AC68EE
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 21 / 2021
Transaction ID : A78C4D3511D9F41D48C1
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BARRACK, EVELYN, IRENE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 781 WEED ST
 City NEW CANAAN State CT Zip Code 06840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1035.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A9BC239A402D7440D8F6
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 128 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRACO, MAXINE, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24934 23 MILE RD
 City MACOMB State MI Zip Code 48042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A6ABBE24E01AD4957B1C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BARRACO, MAXINE, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24934 23 MILE RD
 City MACOMB State MI Zip Code 48042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : AAFE8F8CC5C85424DA87
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BARRETT, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 ARCADO RD NW
 City LILBURN State GA Zip Code 30047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A83C5697D3C304AB08FB
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRIO, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 SW 24 ST.
 City MIAMI State FL Zip Code 33145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : AF57D1195AB484573881
 Amount of Each Receipt this Period 20.00
 Memo Item

B. BARRIO, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 SW 24 ST.
 City MIAMI State FL Zip Code 33145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AF9EFF7A2FF2D4644845
 Amount of Each Receipt this Period 10.00
 Memo Item

C. BARRIO, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 SW 24 ST.
 City MIAMI State FL Zip Code 33145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : ACFC7A51D6EFC4712AA2
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BARRIO, JORGE, , ,

Mailing Address 2321 SW 24 ST.

City MIAMI	State FL	Zip Code 33145
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021

Transaction ID : A3ADF8A8F44A44F25936

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 2321 SW 24 ST.

City MIAMI	State FL	Zip Code 33145
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021

Transaction ID : A251980DBB2E54759892

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 15006 ROCKFOLD DR

City HACIENDA HEIGHTS	State CA	Zip Code 91745
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021

Transaction ID : A8CA1EE0F309A4BBC874

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRO, LINO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15006 ROCKFOLD DR

City HACIENDA HEIGHTS	State CA	Zip Code 91745
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2021

Transaction ID : A9BCCBCF08960435DB80

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 15006 ROCKFOLD DR

City HACIENDA HEIGHTS	State CA	Zip Code 91745
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2021

Transaction ID : ACBA5FC7D0A0A41D1BA1

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 15006 ROCKFOLD DR

City HACIENDA HEIGHTS	State CA	Zip Code 91745
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : AB7471BDAF7E54C56BE4

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARTALIS, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8905 WENONGA ROAD
 City LEAWOOD State KS Zip Code 66206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : AB797AB9DB6CC4B6CBD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BARTALIS, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8905 WENONGA ROAD
 City LEAWOOD State KS Zip Code 66206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : ADB65D67717E24830827
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BARTHELEMY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7573 HILLTON RD
 City ROYALTON State MN Zip Code 56373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 23 / 2021**
Transaction ID : A3ECF8C3F81B74DABBBB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 133 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARTHELEMY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7573 HILLTON RD
 City ROYALTON State MN Zip Code 56373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : ADCB57A36391C4401B0F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BARTKOWSKI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 ABBEY ROAD
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A69B49E1C3F5C4C61A29
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BARTKOWSKI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 ABBEY ROAD
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A60199F5FE5064FCEBF3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 134 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BASILE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10858 CENTER VILLAGE
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A6A215AC58220452DBB2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BASILE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10858 CENTER VILLAGE
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A593FA2890AE74E0B929
 Amount of Each Receipt this Period 10.00
 Memo Item

C. BASILE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10858 CENTER VILLAGE
 City GALENA State OH Zip Code 43021
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AE5B6DF86DB0F45BBA63
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 135 OF 3012					
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BASILE, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10858 CENTER VILLAGE

City GALENA	State OH	Zip Code 43021
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021

Transaction ID : A9F5FE8E0B4AEE864

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 10858 CENTER VILLAGE

City GALENA	State OH	Zip Code 43021
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021

Transaction ID : AFF9E091BF8864D5498D

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 11200 CARRIAGE RD

City PROVIDENCE FORGE	State VA	Zip Code 23140
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) HENRICO COUNTY	Occupation (for Individual) MENTAL HEALTH CLINICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021

Transaction ID : AEF3277E23B724F2AB93

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD
 City VIRGINIA BEACH State VA Zip Code 23452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK CHEVY Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 24 / 2021
Transaction ID : AD2A57CD953464A209D9
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD
 City VIRGINIA BEACH State VA Zip Code 23452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK CHEVY Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 27 / 2021
Transaction ID : A5ABA115548DF4725ADE
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD
 City VIRGINIA BEACH State VA Zip Code 23452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RK CHEVY Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 24 / 2021
Transaction ID : A2DB7C9B9A5B84C33AE1
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 137 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATES, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2021

Transaction ID : A4072CCE213E0423EBD0

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2021

Transaction ID : ACA477687B49474CB25

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2021

Transaction ID : A8CD721AB23E34656A16

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A9D0C382C0F084BEE8ED

Amount of Each Receipt this Period
250.00

Memo Item

B. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : A4233FC90F424455C8A9

Amount of Each Receipt this Period
100.00

Memo Item

C. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : AD6EF225B2E42436B840

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : ADCF7095894BD46BCA02

Amount of Each Receipt this Period
100.00

Memo Item

B. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : ACB509916FF0C4BE48BD

Amount of Each Receipt this Period
250.00

Memo Item

C. BATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2661 VA BEACH BLVD

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) RK CHEVY	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : AAE5899BD1B38454496E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 140 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATRES, SANTIAGO, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10708 JASON WAY
 City EL PASO State TX Zip Code 79935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTRO DE SALUD FAMILIAR LA FE Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A7D071D168A5544D6894
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BATRES, SANTIAGO, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10708 JASON WAY
 City EL PASO State TX Zip Code 79935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTRO DE SALUD FAMILIAR LA FE Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A60C265EFAFCD4C579CC
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BATTAGLINO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9600 FALLARD CT
 City UPPER MARLBORO State MD Zip Code 20772
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) METRO TEST & BALANCE INC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : AB59C2241C6034D8E9C6
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 141 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATTLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9910 LONG POINT RD
 City HOUSTON State TX Zip Code 77055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPREHENSIVE HEALTH CENTER Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A69027A63975F4CF49CD
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BATTLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9910 LONG POINT RD
 City HOUSTON State TX Zip Code 77055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPREHENSIVE HEALTH CENTER Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A0B01A49E9FBD4292A00
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BAUMSTEIGER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BX1147
 City WOODACRE State CA Zip Code 94973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CR BAUMSTEIGER CONST INC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : A5AB57D3C724F488B9F9
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 142 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAUMSTEIGER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BX1147

City WOODACRE	State CA	Zip Code 94973
------------------	-------------	-------------------

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

Name of Employer (for Individual) CR BAUMSTEIGER CONST INC	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : A822F24251C794F73BFD

Amount of Each Receipt this Period
75.00

Memo Item

B. BAUMSTEIGER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BX1147

City WOODACRE	State CA	Zip Code 94973
------------------	-------------	-------------------

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

Name of Employer (for Individual) CR BAUMSTEIGER CONST INC	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A89E326E4A3584C3CAA9

Amount of Each Receipt this Period
75.00

Memo Item

C. BAUMSTEIGER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BX1147

City WOODACRE	State CA	Zip Code 94973
------------------	-------------	-------------------

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

Name of Employer (for Individual) CR BAUMSTEIGER CONST INC	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A5C242E698D094A248C8

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 143 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAWCUM, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3789 INDIANWOOD RD
 City THE VILLAGES State FL Zip Code 32163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 17 / 2021
Transaction ID : A5B996BDE909F46EC9EA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BAWCUM, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3789 INDIANWOOD RD
 City THE VILLAGES State FL Zip Code 32163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A2D2BA21C2D86412B9CF
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BAYLIFF, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 CREEKVIEW RD
 City MC LEANSVILLE State NC Zip Code 27301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A31119C11021248E3BB9
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAYLIFF, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 CREEKVIEW RD
 City MC LEANSVILLE State NC Zip Code 27301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **04 / 12 / 2021**
Transaction ID : A18242DC2792C4DCA8AA
 Amount of Each Receipt this Period 5.00
 Memo Item

B. BAYLIFF, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 CREEKVIEW RD
 City MC LEANSVILLE State NC Zip Code 27301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : A850D7BB501674BACA2D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BAYLIFF, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 CREEKVIEW RD
 City MC LEANSVILLE State NC Zip Code 27301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : A12496A0F6DAC45A2921
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAYLIFF, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 CREEKVIEW RD
 City MC LEANSVILLE State NC Zip Code 27301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 05 / 12 / 2021
Transaction ID : A22CBF5C82CB2431FB90
 Amount of Each Receipt this Period 5.00
 Memo Item

B. BAYLIFF, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 CREEKVIEW RD
 City MC LEANSVILLE State NC Zip Code 27301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AEC46DA32B87D44DA8F2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BAYLIFF, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 CREEKVIEW RD
 City MC LEANSVILLE State NC Zip Code 27301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A16C49A1A1C9B46D9ADC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 146 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAYS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7601 KNIGHTWING CIRCLE
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI ASSOC OF SWFL Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : AF45BC2C72BB64935981
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BAYS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7601 KNIGHTWING CIRCLE
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI ASSOC OF SWFL Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 31 / 2021**
Transaction ID : A05546BEAB50846A6AF5
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BAYS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7601 KNIGHTWING CIRCLE
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GI ASSOC OF SWFL Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A1BFD5947B0A94427A33
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 147 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEALL, RONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5842 COOLWATER COVE
 City DALLAS State TX Zip Code 75252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : AF3AFDE0BFD124109A15
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BEALL, RONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5842 COOLWATER COVE
 City DALLAS State TX Zip Code 75252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : AFCE9894628404EB5B19
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BEALS, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2308 POINT VIEW PL NW
 City GIG HARBOR State WA Zip Code 98335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A032193199BE94D05969
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 148 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEALS, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2308 POINT VIEW PL NW
 City GIG HARBOR State WA Zip Code 98335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AD93667F40AD64763929
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BEARD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 PITTS RD
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A91DAF248B5A742F69C5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BEARD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 PITTS RD
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A53FD4EE8D74E4A2E915
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEARD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 PITTS RD
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : ACB3E35FF606E4BDDDB45
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BEARD, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 PITTS RD
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AB536F689CAEA4D13A2D
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BEARD, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 UP THE CRK
 City LANCASTER State VA Zip Code 22503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : A4A656801515842CBBA6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEARD, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 UP THE CRK
 City LANCASTER State VA Zip Code 22503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 16 / 2021
Transaction ID : ADAFB220D17414353A1B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BEAVEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 PHILLIPS ROAD PO BOX 85
 City UNIONTOWN State KY Zip Code 42461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EIDETIK, INC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A0F7C63F63DDE4A89AD4
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BEAVEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 PHILLIPS ROAD PO BOX 85
 City UNIONTOWN State KY Zip Code 42461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EIDETIK, INC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A28EC8F7DB50A4E78B3E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 151 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEAVEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 PHILLIPS ROAD PO BOX 85
 City UNIONTOWN State KY Zip Code 42461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EIDETIK, INC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A10BC55F0AE4043C2B4C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BEAVEN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 PHILLIPS ROAD PO BOX 85
 City UNIONTOWN State KY Zip Code 42461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EIDETIK, INC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AF2DD34FC97E046769BE
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BECK, ANITA, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26651 PASEO ENSENADA
 City SAN JUAN CAPISTRANO State CA Zip Code 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICON RESEARCH Occupation (for Individual) CRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 30 / 2021
Transaction ID : ACB8004A48C744FDA840
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BECK, ANITA, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26651 PASEO ENSENADA

City SAN JUAN CAPISTRANO	State CA	Zip Code 92675
-----------------------------	-------------	-------------------

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

Name of Employer (for Individual) ICON RESEARCH	Occupation (for Individual) CRA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A9871C9731779411E99C

Amount of Each Receipt this Period
50.00

Memo Item

B. BECK, ANITA, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26651 PASEO ENSENADA

City SAN JUAN CAPISTRANO	State CA	Zip Code 92675
-----------------------------	-------------	-------------------

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

Name of Employer (for Individual) ICON RESEARCH	Occupation (for Individual) CRA
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : A9A19522ECF4C43C18B0

Amount of Each Receipt this Period
50.00

Memo Item

C. BECK, LYN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3118 FLORIDA BLVD
205B

City DELRAY BEACH	State FL	Zip Code 33483
----------------------	-------------	-------------------

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

Name of Employer (for Individual) GRAND VILLA EAST DELRAY BEACH FL	Occupation (for Individual) LIFE ENRICHMENT COORDINATOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : AD6C5DA0A0A674C8B9CC

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BECRAFT, TRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15850 SW 51 MANOR
 City FORT LAUDERDALE State FL Zip Code 33331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A262C2B79EFB74F66B5F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BECRAFT, TRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15850 SW 51 MANOR
 City FORT LAUDERDALE State FL Zip Code 33331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AC5207D03C8494CDBA10
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BEDELL, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 OSPREY POINT LANE
 City CHURCH HILL State MD Zip Code 21623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : AD15A044507BB4905A70
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 154 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEDELL, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 OSPREY POINT LANE
 City CHURCH HILL State MD Zip Code 21623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A6EFC52949E77403D89C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BEGOSH, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18922 CLOVER HILL LANE
 City OLNEY State MD Zip Code 20832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 06 / 03 / 2021
Transaction ID : ADCDC2AF1E1A045E4BBA
 Amount of Each Receipt this Period 15.00
 Memo Item

C. BEGOSH, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18922 CLOVER HILL LANE
 City OLNEY State MD Zip Code 20832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AB23792653607417394D
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 155 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEHNEY, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 SUNDERLAND DR.
 City MARTINSVILLE State IN Zip Code 46151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S.I.M.P., INC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A4D9742DD7B6E4D3292C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BEHNKE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 CAMINO RANCHO
 City SIERRA VISTA State AZ Zip Code 85635-5065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 25 / 2021
Transaction ID : A69CF46805BBF448788D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BEHNKE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 CAMINO RANCHO
 City SIERRA VISTA State AZ Zip Code 85635-5065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2021
Transaction ID : ADADB4219CAD649B8B61
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEHNKE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 CAMINO RANCHO
 City SIERRA VISTA State AZ Zip Code 85635-5065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A484613A9AAD5416D83F
 Amount of Each Receipt this Period 15.00
 Memo Item

B. BEHNKE, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 CAMINO RANCHO
 City SIERRA VISTA State AZ Zip Code 85635-5065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AF5FB1F8C445B4743BE7
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BELISO, LUISITO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3004 STONECREEK DRIVE
 City SUFFOLK State VA Zip Code 23434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A21BDFECF2AB940EB8D9
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BELL, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 W GREYHOUND PASS
 City CARMEL State IN Zip Code 46032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A9167D845D8B6425E83C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BELL, DARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 W GREYHOUND PASS
 City CARMEL State IN Zip Code 46032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A7D17088AA34C41D4BD1
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27228 BRIDLE PL
 City CHANTILLY State VA Zip Code 20152-6374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCENT CONSULTING Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : AE061A7EF36AE456ABA7
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 158 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27228 BRIDLE PL
 City CHANTILLY State VA Zip Code 20152-6374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASCENT CONSULTING Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : AAEC467BD4E80437BAFA
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BELL, MARGARET, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 SARATOGA DR
 City LAWRENCEVILLE State GA Zip Code 30044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : A53D8DE24C4B548AFB48
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. BELL, MARGARET, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 SARATOGA DR
 City LAWRENCEVILLE State GA Zip Code 30044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021
Transaction ID : A5ECE24E483BA4884A41
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BELVERIO, FRED, , ,

Mailing Address 335 MOUNT HERMON RD

City BLAIRSTOWN	State NJ	Zip Code 07825
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2021

Transaction ID : A42CBA99EB26841C48E7

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 335 MOUNT HERMON RD

City BLAIRSTOWN	State NJ	Zip Code 07825
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2021

Transaction ID : AD4555A34DF754BEB880

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 335 MOUNT HERMON RD

City BLAIRSTOWN	State NJ	Zip Code 07825
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2021

Transaction ID : AB45A220B017344199BA

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 160 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BELVERIO, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 MOUNT HERMON RD
 City BLAIRSTOWN State NJ Zip Code 07825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 11 / 2021**
Transaction ID : AEA32F805395040B5BC6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BENDER, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5320 OCEAN ST.
 City BAY CITY State OR Zip Code 97107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : AC9005CFBEA2842C5824
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BENDER, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5320 OCEAN ST.
 City BAY CITY State OR Zip Code 97107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 12 / 2021**
Transaction ID : ACF2A427A8AD3424D922
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 161 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AB2E67EE345224821817
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A767FE020B3234645B78
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : AF983FAC616410A905
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : A9BEC29E1CFDC4308B21
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : A1454BFDF78744E7287C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : AD63A63A39D11425C885
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AA20AFA5291E047C38B2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A941AA97A69CB48E498B
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AC6C1AB14AFF04EAB997
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 164 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AC977D78F9ABE4BC19FA
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A7A4D7514BB204329AD7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A49CDC234029A4F4EA84
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : AC121D54874474C4EB96
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AB7AC1AF2A63E4BA6939
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A67F4FA94AA4F4F11937
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 166 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENGTON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GAELSONG LANE
 City READING State PA Zip Code 19610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A8B42B5A00CCC4C25B5A
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. BENITEZ, JUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14671 W HWY 328
 City OCALA State FL Zip Code 34482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A1EC9613C49154519BC1
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. BENJAMIN, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W 28TH ST
 City KEARNEY State NE Zip Code 68845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BD CONSTRUCTION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : A4BC20C16E726494EB3F
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 167 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENJAMIN, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W 28TH ST
 City KEARNEY State NE Zip Code 68845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BD CONSTRUCTION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2021
Transaction ID : A6C790F032D234588973
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BENJAMIN, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W 28TH ST
 City KEARNEY State NE Zip Code 68845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BD CONSTRUCTION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021
Transaction ID : AE6FA56CF3EC7498CB35
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BENJAMIN, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W 28TH ST
 City KEARNEY State NE Zip Code 68845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BD CONSTRUCTION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : A4FE289E9C8E0424DB46
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 168 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENNETT, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 MOCKINGBIRD LN
 City RINGGOLD State GA Zip Code 30736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 02 / 2021
Transaction ID : AFCA178A5CDAE488EB9F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BENNETT, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 MOCKINGBIRD LN
 City RINGGOLD State GA Zip Code 30736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 09 / 2021
Transaction ID : AFE0790809DCC40DA97D
 Amount of Each Receipt this Period 5.00
 Memo Item

C. BENNETT, MICHAEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 MOCKINGBIRD LN
 City RINGGOLD State GA Zip Code 30736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AC127C40D1BCE4AB1B06
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENNETT, PAUL, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39315 FM 1458
 City BROOKSHIRE State TX Zip Code 77423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE FRIEDKIN GROUP Occupation (for Individual) DIRECTOR REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : A40D1C1EADF9D4FB4B32
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BENSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 SOUTH 52ND STREET
 City LINCOLN State NE Zip Code 68510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNHUSKER HYBRIDS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : AF0B994B99317468EB3F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BENSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 SOUTH 52ND STREET
 City LINCOLN State NE Zip Code 68510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORNHUSKER HYBRIDS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AE95B903594A1444BBD8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 170 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERGIADIS, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7634 SENTRY OAK CIRCLE WEST
 City JACKSONVILLE State FL Zip Code 32256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CARETAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 16 / 2021**
Transaction ID : A88716816F1364384BD2
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BERGIADIS, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7634 SENTRY OAK CIRCLE WEST
 City JACKSONVILLE State FL Zip Code 32256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CARETAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 16 / 2021**
Transaction ID : A7DD1439EB35E459CBBA
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BERGIADIS, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7634 SENTRY OAK CIRCLE WEST
 City JACKSONVILLE State FL Zip Code 32256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CARETAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 16 / 2021**
Transaction ID : AFCC80C80D43E49479E1
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERG, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 HAWKEN ROAD
 City RENO State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A2BB4036522474AB8BF3
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BERG, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 HAWKEN ROAD
 City RENO State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A1F48A99698644B07B21
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BERGMAN, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2821 S PARK ROAD
 City KOKOMO State IN Zip Code 46902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AF853EE0EE5ED464A8CB
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERISH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16222 ANDALUCIA LANE
 City DELRAY BEACH State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 29 / 2021**
Transaction ID : A88195619F05B4DAB853
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BERISH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16222 ANDALUCIA LANE
 City DELRAY BEACH State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : A9053086DC79E40539BD
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BERISH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16222 ANDALUCIA LANE
 City DELRAY BEACH State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 29 / 2021**
Transaction ID : A441394E39E1146DAB2C
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 OF 3012 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERISH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16222 ANDALUCIA LANE
 City DELRAY BEACH State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A768C31B391ED47199C0
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BERLINGERI, ANGEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4429 87TH ST
 City LUBBOCK State TX Zip Code 79424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CETERA ADVISORS Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A6C9F001A6DE44FC18DC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BERLINGERI, ANGEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4429 87TH ST
 City LUBBOCK State TX Zip Code 79424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CETERA ADVISORS Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A03E0515728F640FFBCB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 174 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERNACKI, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2198 HENDERSHOT ROAD
 City NORTH LIBERTY State IA Zip Code 52317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 17 / 2021
Transaction ID : A29CD627CA2E04299882
 Amount of Each Receipt this Period 150.00
 Memo Item

B. BERNAL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 88
 City POMERENE State AZ Zip Code 85627-0088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AB1959582D5614A4A9CE
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BERNDT, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63476 PIERSON ROAD
 City CASSOPOLIS State MI Zip Code 49031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MDI Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : ACA82798A1BB94207A82
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 175 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERNHARDT, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PRAIRIE LANE
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : A655629E518FF49B09A3
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BERNHARDT, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PRAIRIE LANE
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2021
Transaction ID : A8B6A9064751A4C09820
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BERNHARDT, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PRAIRIE LANE
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A211BE35DEA3B4553AB0
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERRIGAN, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 775 WOODGATE BLVD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUISIANA GLASS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : A577560B234DC4A9F7A

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 775 WOODGATE BLVD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUISIANA GLASS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2021

Transaction ID : A8145E43440F54C89BEB

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 775 WOODGATE BLVD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUISIANA GLASS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2021

Transaction ID : AF306F61937614E1EA17

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 3012		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERRIGAN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 WOODGATE BLVD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUISIANA GLASS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A1711BB699E95471AB8B

Amount of Each Receipt this Period
35.00

Memo Item

B. BERRIGAN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 WOODGATE BLVD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUISIANA GLASS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A21F4C137DE2B4213937

Amount of Each Receipt this Period
25.00

Memo Item

C. BERRIGAN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 WOODGATE BLVD

City BATON ROUGE	State LA	Zip Code 70808
---------------------	-------------	-------------------

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

Name of Employer (for Individual) LOUISIANA GLASS INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A6DCBD8F1293645A5A22

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERRIGAN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 WOODGATE BLVD
 City BATON ROUGE State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUISIANA GLASS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A58610792373B475DA91
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BERRIGAN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 WOODGATE BLVD
 City BATON ROUGE State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUISIANA GLASS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AFDC15F56AE4E40DE8F0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BERRIGAN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 WOODGATE BLVD
 City BATON ROUGE State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUISIANA GLASS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AE2891DA3BD894A09A1D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERRIGAN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 WOODGATE BLVD
 City BATON ROUGE State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOUISIANA GLASS INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **06 / 29 / 2021**
Transaction ID : A1FC444C001F1492E9F9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BERRY, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50329 E FELLOWS CREEK COURT
 City PLYMOUTH State MI Zip Code 48170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIRD JUDICIAL CIRCUIT COURT Occupation (for Individual) JUDGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : AE5A00D1FC5A64A51BEA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BERRY, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50329 E FELLOWS CREEK COURT
 City PLYMOUTH State MI Zip Code 48170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIRD JUDICIAL CIRCUIT COURT Occupation (for Individual) JUDGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : ACAA77B0FCD948088F7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 181 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERRYMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10007 S 87TH E AVE
 City TULSA State OK Zip Code 74133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIMARRON TELEPHONE Occupation (for Individual) COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : AFC837E0ECDE341EA8A1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BERRYMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10007 S 87TH E AVE
 City TULSA State OK Zip Code 74133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIMARRON TELEPHONE Occupation (for Individual) COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 21 / 2021**
Transaction ID : AAE5A4E3840FF400AA04
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BERRYMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10007 S 87TH E AVE
 City TULSA State OK Zip Code 74133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CIMARRON TELEPHONE Occupation (for Individual) COMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **06 / 21 / 2021**
Transaction ID : AFF38DB84581D4E07828
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERRY, PAULINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2743 DEL AMO DR

City YUBA CITY	State CA	Zip Code 95993
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : A32F5482EE08D4C3082B

Amount of Each Receipt this Period
175.00

Memo Item

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

Mailing Address 8322 LA SENDA ROAD

City RANCHO CUCAMONGA	State CA	Zip Code 91701
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : AB9E84A741FE94067AC4

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 8322 LA SENDA ROAD

City RANCHO CUCAMONGA	State CA	Zip Code 91701
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : A0864C169D2F04458BB4

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	215.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 183 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEVILACQUA, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 DINAH ROCK RD/POBX 835
 City SHELTER ISLAND HEIGHTS State NY Zip Code 11965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A3C8E3E4ADA1C498BAC2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BEVILACQUA, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 DINAH ROCK RD/POBX 835
 City SHELTER ISLAND HEIGHTS State NY Zip Code 11965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A5AA14DEFD8C924B4F86C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BEYER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 CR 6920
 City LUBBOCK State TX Zip Code 79407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROGER J WOLCOTT, MD Occupation (for Individual) MEDICAL OFFICE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : AD6A632B810524733AAF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEYER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 CR 6920
 City LUBBOCK State TX Zip Code 79407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROGER J WOLCOTT, MD Occupation (for Individual) MEDICAL OFFICE MANAGER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : ABA0C03BD60144108B5E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BEZAGUET, DEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5841 N OCEAN BLVD APT F2
 City BOYNTON BEACH State FL Zip Code 33435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 700.00

Date of Receipt 03 / 05 / 2021
Transaction ID : A509B7BC573EE4F278E2
 Amount of Each Receipt this Period 700.00
 Memo Item

C. BHARATI, SAROJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 NORTH MICHIGAN AVE 5302
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 215.00

Date of Receipt 03 / 16 / 2021
Transaction ID : A97353A7F9CF64B2DBEA
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **770.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BHARATI, SAROJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 NORTH MICHIGAN AVE
 5302
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **03 / 27 / 2021**
Transaction ID : A7FF5E900B95B4794998
 Amount of Each Receipt this Period 15.00
 Memo Item

B. BHARATI, SAROJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 NORTH MICHIGAN AVE
 5302
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : AA70BCFB31E34492EAF1
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BHARATI, SAROJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 NORTH MICHIGAN AVE
 5302
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : A155190BEA4F74E4898B
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 186 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BHARATI, SAROJA, , ,

Mailing Address 950 NORTH MICHIGAN AVE
5302

City CHICAGO State IL Zip Code 60611

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2021

Transaction ID : A8BDF16CDC4F9442EB20

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 950 NORTH MICHIGAN AVE
5302

City CHICAGO State IL Zip Code 60611

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2021

Transaction ID : A16DB649DB8A54775980

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 950 NORTH MICHIGAN AVE
5302

City CHICAGO State IL Zip Code 60611

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2021

Transaction ID : A870F52DEE8334171923

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BHARATI, SAROJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 NORTH MICHIGAN AVE
 5302
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A20DF803B46A043429A7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BHARATI, SAROJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 NORTH MICHIGAN AVE
 5302
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A48AAD96ABADB47FAA6/
 Amount of Each Receipt this Period 20.00
 Memo Item

C. BHARATI, SAROJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 NORTH MICHIGAN AVE
 5302
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AEE5BBA605D564128AA4
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 188 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BIAR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9814 MEADOW BEND LN
 City HOUSTON State TX Zip Code 77065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHMSTEDE LTD Occupation (for Individual) SALES ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2021
Transaction ID : AC0266045A5EC4A0E9E2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BIAR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9814 MEADOW BEND LN
 City HOUSTON State TX Zip Code 77065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHMSTEDE LTD Occupation (for Individual) SALES ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2021
Transaction ID : A21920CDBD5044B41913
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BIAR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9814 MEADOW BEND LN
 City HOUSTON State TX Zip Code 77065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHMSTEDE LTD Occupation (for Individual) SALES ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A49D4067096954158AE1
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BIAR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9814 MEADOW BEND LN
 City HOUSTON State TX Zip Code 77065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OHMSTEDE LTD Occupation (for Individual) SALES ENGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AEF89F36449D8408E9BF
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BICKETT, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3513 SALLES RIDGE COURT
 City MIDLOTHIAN State VA Zip Code 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A3A6DCADCDFD974EB1AAI
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BICKLER, LYNNE, Z, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1478 FAIRWAYS CIR
 City OCONOMOWOC State WI Zip Code 53066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 22 / 2021
Transaction ID : AF223C6458793483DAFA
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 190 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BIERMAN, CAROL, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 CORO TERRCE
 City GLENDALE State CA Zip Code 91208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A993FE70FCBFC4F66B2B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BIERMAN, CAROL, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 CORO TERRCE
 City GLENDALE State CA Zip Code 91208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A4274C90675DB440CBC6
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BIERMAN, CAROL, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 CORO TERRCE
 City GLENDALE State CA Zip Code 91208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A0B988B6F807842B1ADD
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BIGINI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12030 FOREST ESTATES DRIVE
 City HOUSTON State TX Zip Code 77066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A63989D944F3D4088A61
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BIGINI, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12030 FOREST ESTATES DRIVE
 City HOUSTON State TX Zip Code 77066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A8532724BC8D24B41A0A
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BIGONY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 WILDERNESS WAY
 City LONGVIEW State TX Zip Code 75604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : AE67509F9ADC0479180F
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 192 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BILES, RACHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 LINDSAY LN
 SUITE B
 City CODY State WY Zip Code 82414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YELLOWSTONE SPORTS MEDICINE Occupation (for Individual) MEDICAL OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A14BDC7C116B5476DA7E
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BILES, RACHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 LINDSAY LN
 SUITE B
 City CODY State WY Zip Code 82414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YELLOWSTONE SPORTS MEDICINE Occupation (for Individual) MEDICAL OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A965A3D8806224A2BBBE
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BILES, RACHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 LINDSAY LN
 SUITE B
 City CODY State WY Zip Code 82414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YELLOWSTONE SPORTS MEDICINE Occupation (for Individual) MEDICAL OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AE60A7DD7AE9246BB896
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 193 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BILES, RACHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 LINDSAY LN
 SUITE B
 City CODY State WY Zip Code 82414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YELLOWSTONE SPORTS MEDICINE Occupation (for Individual) MEDICAL OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AEA98931D7E4840168E5
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BILLINGSLEA, BARBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54624 FOREPAUGH PEAK RD
 City WICKENBURG State AZ Zip Code 85390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUES PLUMBING Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 01 / 2021
Transaction ID : A616A61161435497788C
 Amount of Each Receipt this Period 250.00
 Memo Item

C. BILLINGSLEA, BARBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54624 FOREPAUGH PEAK RD
 City WICKENBURG State AZ Zip Code 85390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUES PLUMBING Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 01 / 2021
Transaction ID : A326E472D649F422A9D9
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 194 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BILLINGSLEA, BARBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54624 FOREPAUGH PEAK RD
 City WICKENBURG State AZ Zip Code 85390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUES PLUMBING Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 01 / 2021**
Transaction ID : A1A776ACF1ED8496383E
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BILLINGSLEA, BARBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54624 FOREPAUGH PEAK RD
 City WICKENBURG State AZ Zip Code 85390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUES PLUMBING Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 01 / 2021**
Transaction ID : A17EE9004D0674454B70
 Amount of Each Receipt this Period 250.00
 Memo Item

C. BILLINGSLEA, BARBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54624 FOREPAUGH PEAK RD
 City WICKENBURG State AZ Zip Code 85390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUES PLUMBING Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **05 / 01 / 2021**
Transaction ID : AF34DC330E4974F1387E
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 195 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BILLINGSLEA, BARBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54624 FOREPAUGH PEAK RD
 City WICKENBURG State AZ Zip Code 85390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUES PLUMBING Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AFB9B5E3E62544950B40
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BINEHAM, H MAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NAVASOTA CIRCLE
 City GEORGETOWN State TX Zip Code 78633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AAD08828DA4064067B23
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BINEHAM, H MAC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 NAVASOTA CIRCLE
 City GEORGETOWN State TX Zip Code 78633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A21AE4985765A4A62AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 196 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BIRDIE, KHURSHED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST END AVE
 9F
 City NEW YORK State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHSTAR TECHNOLOGIES INC. Occupation (for Individual) IT EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : AD7D5074F9A6B4C45913
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BIRDIE, KHURSHED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 WEST END AVE
 9F
 City NEW YORK State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHSTAR TECHNOLOGIES INC. Occupation (for Individual) IT EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A44D370D39BF348E9B78
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BIRDSONG, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 617 HILLCREST RD.
 City SHERWOOD State AR Zip Code 72120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : AA0276B1E203C40AB961
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 197 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BIRDSONG, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 617 HILLCREST RD.
 City SHERWOOD State AR Zip Code 72120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AB345847D2B024D95925
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BISHOP, MARY, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4468 DRUM CASTLE COURT
 City VIRGINIA BEACH State VA Zip Code 23455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2021
Transaction ID : AF99E147DB30546079EC
 Amount of Each Receipt this Period 250.00
 Memo Item

C. BISHOP, MARY, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4468 DRUM CASTLE COURT
 City VIRGINIA BEACH State VA Zip Code 23455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 05 / 05 / 2021
Transaction ID : ACE099FB29E884E5DB57
 Amount of Each Receipt this Period 130.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	430.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 LISA CIRCLE

City WHITE LAKE	State MI	Zip Code 48386
--------------------	-------------	-------------------

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

Name of Employer (for Individual) AMERICAN AIRLINES	Occupation (for Individual) AIRLINE PILOT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2021

Transaction ID : AFA9AD84DB5EC4C8483A

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 75 LISA CIRCLE

City WHITE LAKE	State MI	Zip Code 48386
--------------------	-------------	-------------------

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

Name of Employer (for Individual) AMERICAN AIRLINES	Occupation (for Individual) AIRLINE PILOT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2021

Transaction ID : AEF74F2E9CF334BCCB42

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 75 LISA CIRCLE

City WHITE LAKE	State MI	Zip Code 48386
--------------------	-------------	-------------------

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

Name of Employer (for Individual) AMERICAN AIRLINES	Occupation (for Individual) AIRLINE PILOT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2021

Transaction ID : A5FE80C277E154B5BA78

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 LISA CIRCLE

City WHITE LAKE	State MI	Zip Code 48386
--------------------	-------------	-------------------

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

Name of Employer (for Individual) AMERICAN AIRLINES	Occupation (for Individual) AIRLINE PILOT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : ACC75287D90BD4E74890

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 75 LISA CIRCLE

City WHITE LAKE	State MI	Zip Code 48386
--------------------	-------------	-------------------

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

Name of Employer (for Individual) AMERICAN AIRLINES	Occupation (for Individual) AIRLINE PILOT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A4B9E4684799643B1A65

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 513 ASBURY ROAD

City CHURCHVILLE	State MD	Zip Code 21028
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2021

Transaction ID : A0B89474B503544FC928

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 200 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 STILL COVE DRIVE
 City HUNTSVILLE State AL Zip Code 35811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : ADC4D4CD9CF494881952
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BLACK, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 STILL COVE DRIVE
 City HUNTSVILLE State AL Zip Code 35811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A846CF55928424354A2F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BLACK, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 WILLIAMS WAY
 APT 2
 City ORRINGTON State ME Zip Code 04474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A732E169E8148409F805
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACKMORE, ERNEST, W., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 N SAN MATEO AVE

City VENTURA	State CA	Zip Code 93004
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BRUKER NANO	Occupation (for Individual) PLANNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A41019EF0CA234DAD96C

Amount of Each Receipt this Period
 10.00

Memo Item

B. BLACKMORE, ERNEST, W., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 N SAN MATEO AVE

City VENTURA	State CA	Zip Code 93004
-----------------	-------------	-------------------

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

Name of Employer (for Individual) BRUKER NANO	Occupation (for Individual) PLANNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A90101018EEE34C3598D

Amount of Each Receipt this Period
 5.00

Memo Item

C. BLACK, SAMUEL, P., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2021
Transaction ID : A00830288573646779AE

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

Transaction ID : AD4A9A5D0F451457AAE6

Amount of Each Receipt this Period
5.00

Memo Item

B. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2021

Transaction ID : A2151575B947144A5BFA

Amount of Each Receipt this Period
35.00

Memo Item

C. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2021

Transaction ID : A01AFBB4B6D194A0EAC8

Amount of Each Receipt this Period
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2021

Transaction ID : A086B7A16CF7F430BA88

Amount of Each Receipt this Period
35.00

Memo Item

B. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : A42DD1D5515944AC68DD

Amount of Each Receipt this Period
5.00

Memo Item

C. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2021

Transaction ID : AA62CDE4AF4C34227BD4

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2021

Transaction ID : A686B08A252D2402C99D

Amount of Each Receipt this Period
50.00

Memo Item

B. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2021

Transaction ID : A5A9FA82A2A7D42FD926

Amount of Each Receipt this Period
35.00

Memo Item

C. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2021

Transaction ID : A689D0F2D930643F1928

Amount of Each Receipt this Period
5.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : ABB88B6DE3D6046FE837

Amount of Each Receipt this Period
35.00

Memo Item

B. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2021

Transaction ID : A91AF619052A24A78BD5

Amount of Each Receipt this Period
50.00

Memo Item

C. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2021

Transaction ID : AF3469B1BC81742C398E

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : A4FDC3E043FCA4138AE1

Amount of Each Receipt this Period
5.00

Memo Item

B. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2021

Transaction ID : A0BB158489C0241C29A1

Amount of Each Receipt this Period
50.00

Memo Item

C. BLACK, SAMUEL, P, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 121 E 2ND ST

City ERIE	State PA	Zip Code 16507
--------------	-------------	-------------------

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

Name of Employer (for Individual) ERIE MANAGEMENT GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : A645E6BD460FE4DFCB0D

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLAIR, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1272 ASHLAND DR
 City LEMOORE State CA Zip Code 93245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : A656E12F765AE44EC88B
 Amount of Each Receipt this Period 10.00
 Memo Item

B. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **03 / 10 / 2021**
Transaction ID : A8AD4FC500C8746B689B
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **03 / 23 / 2021**
Transaction ID : AE928FEB04C3B48498E8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2021
Transaction ID : A418457F501654701892
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A595DB30A8657483E84F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 371.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : ADA83374553F6442E8B5
 Amount of Each Receipt this Period
 6.25
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	91.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 371.25

Date of Receipt **04 / 26 / 2021**
Transaction ID : A287D7F3B7F3E4A3080D
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 406.25

Date of Receipt **05 / 10 / 2021**
Transaction ID : AAE27AC2714994F768EF
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BLAIR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 BENJAMIN LANE
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.25

Date of Receipt **05 / 23 / 2021**
Transaction ID : AAFBE4E56BE2F49C298E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLAKE, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 TRINITY DR
 City ELON State NC Zip Code 27244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : AC0F13F3F5E394349954
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BLAKE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 PLAYER LANE
 City PASO ROBLES State CA Zip Code 93446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 02 / 2021**
Transaction ID : AE82D10FBA06C410AB4D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BLAKE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 PLAYER LANE
 City PASO ROBLES State CA Zip Code 93446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : A6B6210AF141B468AB5E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 211 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLAKE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 PLAYER LANE
 City PASO ROBLES State CA Zip Code 93446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : A4E36B2DDC55447509A6
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BLAKE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 PLAYER LANE
 City PASO ROBLES State CA Zip Code 93446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A96740EFDD6354DDF8A4
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BLAKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 BEAR ISLAND COURT
 City LAS VEGAS State NV Zip Code 89147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A176090AAC8C14B8391E
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLANCHARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 FOREST DRIVE
 City BEDFORD State NH Zip Code 03110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANNISTRARO Occupation (for Individual) LU 537 PIPEFITTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : A1068EEC16B51462B9BC
 Amount of Each Receipt this Period 17.00
 Memo Item

B. BLANCHARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 FOREST DRIVE
 City BEDFORD State NH Zip Code 03110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANNISTRARO Occupation (for Individual) LU 537 PIPEFITTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A76F4A02C5B96413D959
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BLANCHARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 FOREST DRIVE
 City BEDFORD State NH Zip Code 03110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANNISTRARO Occupation (for Individual) LU 537 PIPEFITTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : A00C9E19087C94B50B85
 Amount of Each Receipt this Period 17.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	84.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLANCHARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 FOREST DRIVE
 City BEDFORD State NH Zip Code 03110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANNISTRARO Occupation (for Individual) LU 537 PIPEFITTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 318.00

Date of Receipt 05 / 30 / 2021
Transaction ID : ADA684D338B924D8086C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BLANCHARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 FOREST DRIVE
 City BEDFORD State NH Zip Code 03110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANNISTRARO Occupation (for Individual) LU 537 PIPEFITTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AC52F58653E4E4BE8BE9
 Amount of Each Receipt this Period 17.00
 Memo Item

C. BLANCHARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 FOREST DRIVE
 City BEDFORD State NH Zip Code 03110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANNISTRARO Occupation (for Individual) LU 537 PIPEFITTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AE90D14EEAC484C25950
 Amount of Each Receipt this Period 17.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	84.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 214 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLANCHARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 FOREST DRIVE
 City BEDFORD State NH Zip Code 03110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANNISTRARO Occupation (for Individual) LU 537 PIPEFITTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AAB077601C0FB4F31830
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BLANKENBECKLER, REBECCA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3911 SADDLEHORN DR
 City COLUMBUS State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXPRESS SCRIPTS Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AAF61DB81C84F4C8BAAB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BLINNE, LOSN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 WINFIELD PLAZA
 City WINFIELD State MO Zip Code 63389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINFIELD PHARMACY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A5E13FF7779B244A3B4A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLOCHOWIAK, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 GREENFIELD LANE
 City CASTALIAN SPRINGS State TN Zip Code 37031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A664AE4D402DE4FED9D8
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BLYE, FRANCES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33310 EAST RED MOUNTAIN ROAD
 City BENTON CITY State WA Zip Code 99320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A87995EA912C448C1923
 Amount of Each Receipt this Period 15.00
 Memo Item

C. BLYE, FRANCES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33310 EAST RED MOUNTAIN ROAD
 City BENTON CITY State WA Zip Code 99320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A5F5370F6D3D2421DA1E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 85.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLYE, FRANCES, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33310 EAST RED MOUNTAIN ROAD

City BENTON CITY	State WA	Zip Code 99320
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : A77837BB1A67B4C5E82B

Amount of Each Receipt this Period
15.00

Memo Item

B. BLYE, FRANCES, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33310 EAST RED MOUNTAIN ROAD

City BENTON CITY	State WA	Zip Code 99320
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : A32ECD83B83CB40E6953

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 586 VANDERBILT AVE
APT 4

City BROOKLYN	State NY	Zip Code 11238
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2021

Transaction ID : A1A7886C4F1DC4ADBBA4

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOATSWAIN, VALARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 586 VANDERBILT AVE
 APT 4

City BROOKLYN State NY Zip Code 11238

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 03 / 31 / 2021
Transaction ID : A9CE3C82A846041B8A93

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 3232 N. PIONEER AVE

City CHICAGO State IL Zip Code 60634

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

Name of Employer (for Individual) MASTER HAND LLC Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 03 / 2021
Transaction ID : A725ACDC31E644A81AE8

Amount of Each Receipt this Period
 50.00

Memo Item

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

Mailing Address 3232 N. PIONEER AVE

City CHICAGO State IL Zip Code 60634

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

Name of Employer (for Individual) MASTER HAND LLC Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 03 / 2021
Transaction ID : AC0DCBB921CE648C1928

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

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

Mailing Address 11500W OLOMOUC BLVD
400

City LOS ANGELES	State CA	Zip Code 90064
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2021

Transaction ID : AA03D6564A4CB4B339F3

Amount of Each Receipt this Period
50.00

Memo Item

B. BOCHIS, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11500W OLOMOUC BLVD
400

City LOS ANGELES	State CA	Zip Code 90064
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2021

Transaction ID : A1393ED7E7AFA4BDEA7A

Amount of Each Receipt this Period
50.00

Memo Item

C. BOCKLAGE, JOSEPH, F., DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28638 LACAILLE DRIVE

City NAPLES	State FL	Zip Code 34119
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : ADD2C3A8462664A62938

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 219 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOCKLAGE, JOSEPH, F., DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28638 LACAILLE DRIVE

City NAPLES	State FL	Zip Code 34119
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : A45C2FDD8B0E449C1977

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 3425 S SHERMAN STREET
303

City ENGLEWOOD	State CO	Zip Code 80113
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : AC1A32060EA54481CB3A

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 3507 17TH STREET SOUTH

City FARGO	State ND	Zip Code 58104-6131
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2021

Transaction ID : AF62AD6A00DF84651B56

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOGENSCHUTZ, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 GRAY STREET
 City BRIDGEPORT State IL Zip Code 62417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A301F1B0D24894BB29D6
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. BOGGS, JOHN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 RAILWAY AVE.
 City EVERETT State WA Zip Code 98201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEEP SEA FISHERIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A2D0468534ECA498DAF0
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BOGGS, JOHN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 RAILWAY AVE.
 City EVERETT State WA Zip Code 98201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEEP SEA FISHERIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : AC96AAA69E9054D1DB19
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOGGS, JOHN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 RAILWAY AVE.
 City EVERETT State WA Zip Code 98201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEEP SEA FISHERIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A2DBD85724AEE4BADBFI
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BOGGUS, JAMES, CARTER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3060 W 58TH AVE
 City DENVER State CO Zip Code 80221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENVER ANALYTICAL LABORATORY Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 04 / 26 / 2021
Transaction ID : A4C2A847B7B9D460DA3A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BOGGUS, JAMES, CARTER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3060 W 58TH AVE
 City DENVER State CO Zip Code 80221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENVER ANALYTICAL LABORATORY Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2021
Transaction ID : AD7B6B138C37B49CF806
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOGGUS, JAMES, CARTER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3060 W 58TH AVE
 City DENVER State CO Zip Code 80221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENVER ANALYTICAL LABORATORY Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AFCC1A669ACA24F749E6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BOGGUS, JAMES, CARTER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3060 W 58TH AVE
 City DENVER State CO Zip Code 80221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DENVER ANALYTICAL LABORATORY Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A868C1610F27A4FEAAC7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BOGHOSIAN, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 CORONET CT
 City SCHENECTADY State NY Zip Code 12309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 17 / 2021
Transaction ID : AF93087B41256413F89E
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 223 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOGHOSIAN, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 CORONET CT
 City SCHENECTADY State NY Zip Code 12309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A5477BD236FE244C7BA5
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BOHARIC, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 348 EASTGROVE ROAD
 City RIVERSIDE State IL Zip Code 60546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A81A9A0EACAC548C28CF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BOHARIC, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 348 EASTGROVE ROAD
 City RIVERSIDE State IL Zip Code 60546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A81E097244874455190D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 224 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOHN, EDWARD, L, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24232 LA PALA LANE
 City MISSION VIEJO State CA Zip Code 92691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPRS CONSTRUCTION SERVICES Occupation (for Individual) CINSTRUCTION PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A1F68BB9FCD4F480D8DF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BOHN, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 524 BUTLER AVENUE
 City WYOMING State PA Zip Code 18644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BOHN LANDSCAPE CONTRACTORS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A143090450FB14E8B9D5
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BOLAND, JOE, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2525 POTOMAC AVE NE
 City ATLANTA State GA Zip Code 30305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A9A2876C1DF7C4BA58BF
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

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

Mailing Address 134 ROLLING HILL DR.

City DAPHNE	State AL	Zip Code 36526
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2021

Transaction ID : A26620D42AF404C81B88

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 134 ROLLING HILL DR.

City DAPHNE	State AL	Zip Code 36526
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2021

Transaction ID : A7F5DF79818B340039E7

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 134 ROLLING HILL DR.

City DAPHNE	State AL	Zip Code 36526
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2021

Transaction ID : A7D512BE253864394ABF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

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

Mailing Address 134 ROLLING HILL DR.

City DAPHNE	State AL	Zip Code 36526
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2021

Transaction ID : A2CBD9791ED4F4E84875

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 134 ROLLING HILL DR.

City DAPHNE	State AL	Zip Code 36526
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2021

Transaction ID : A844BED4975D747AB857

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 134 ROLLING HILL DR.

City DAPHNE	State AL	Zip Code 36526
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2021

Transaction ID : A1AA10016002646FEA96

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOLDEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 ROLLING HILL DR.
 City DAPHNE State AL Zip Code 36526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A00C319D358B143C18A9
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BOLDEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 ROLLING HILL DR.
 City DAPHNE State AL Zip Code 36526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AB6F1DA2A7ACB49F2BE1
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BOLDEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 ROLLING HILL DR.
 City DAPHNE State AL Zip Code 36526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A6E3F0CFB22D24343A79
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOLDT, DAN, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2929 E. RAMBLEWOOD

City SAN ANTONIO	State TX	Zip Code 78261
---------------------	-------------	-------------------

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

Name of Employer (for Individual) BOLDT & BOLDT, CPA'S	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : AEFEOA2F0637B454B9D5

Amount of Each Receipt this Period
50.00

Memo Item

B. BOLDT, DAN, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2929 E. RAMBLEWOOD

City SAN ANTONIO	State TX	Zip Code 78261
---------------------	-------------	-------------------

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

Name of Employer (for Individual) BOLDT & BOLDT, CPA'S	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : AFFB3007A7C41492EA12

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 3080 500 90TH RD

City RUSHVILLE	State NE	Zip Code 69360
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A8D47D85E584B4162B65

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOLEK, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3080 500 90TH RD
 City RUSHVILLE State NE Zip Code 69360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A0ABCDABEF3E543BBAD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BOLINDER, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5500 E PORCUPINE AVE
 City WASILLA State AK Zip Code 99654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXCAVATING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 27 / 2021
Transaction ID : AD241094D32694D7B9BB
 Amount of Each Receipt this Period 300.00
 Memo Item

C. BOLTE, ROSEMARY, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 BURR RD
 City SAN ANTONIO State TX Zip Code 78209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AF48185A970EB42268B0
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOLTON, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 FLYING R RANCH RD W
 City SPRING BRANCH State TX Zip Code 78070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAF-T-BOX LP Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A53F19666A1714519BBC
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BOLTON, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 FLYING R RANCH RD W
 City SPRING BRANCH State TX Zip Code 78070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAF-T-BOX LP Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : A14920BAE938744BBAF2
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BOLTON, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 FLYING R RANCH RD W
 City SPRING BRANCH State TX Zip Code 78070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAF-T-BOX LP Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : AFD5523E621064DCCA71
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 231 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOLTON, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 FLYING R RANCH RD W
 City SPRING BRANCH State TX Zip Code 78070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAF-T-BOX LP Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AB865C8CB952241A69A2
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BOLTON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 CREEK VISTA DRIVE
 City CUMMING State GA Zip Code 30041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A6914E7557DA4453995D
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BOND, GARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 BOND LN.
 City ELDON State MO Zip Code 65026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAKELARIS FORD Occupation (for Individual) AUTO TECH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A9E69607B4A844924815
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOND, GARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 BOND LN.
 City ELDON State MO Zip Code 65026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAKELARIS FORD Occupation (for Individual) AUTO TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 02 / 2021
Transaction ID : A3DFA6A7096474102A51
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BOND, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 E. PARK SHORES CIR 27E
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 03 / 2021
Transaction ID : A34A8ACF0EC9447DD975
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BOND, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 E. PARK SHORES CIR 27E
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 03 / 2021
Transaction ID : AD2D5ABA4D59B44948B6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BONEH, NIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 355 TROON COURT

City LOUISVILLE	State CO	Zip Code 80027
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NOAA	Occupation (for Individual) SOFTWARE ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A4AA5A77022248EAAB3

Amount of Each Receipt this Period
 50.00

Memo Item

B. BONE, LONNIE, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 KCACIA DRIVE SUITE 108

City INDIAN HEAD PARK	State IL	Zip Code 60525
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AD2FD7B54175F43F1AB3

Amount of Each Receipt this Period
 400.00

Memo Item

C. BONNECAZE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11441 CEDAR PARK AVE

City BATON ROUGE	State LA	Zip Code 70809
---------------------	-------------	-------------------

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

Name of Employer (for Individual) BONNECAZE PLUMBING LLC	Occupation (for Individual) PLUMBING CONTRACTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : AE4620AF93DCB415CAB8

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	485.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 234 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOOTH-MORAN, JULIE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7531 MAYO ST
 City CENTURY State FL Zip Code 32535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY PHARMACY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A729C0BED2E6648108E6
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BOOTH-MORAN, JULIE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7531 MAYO ST
 City CENTURY State FL Zip Code 32535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY PHARMACY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : AFDBF7D5B30154080B08
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BORGENDALE, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9540 SUNRISE LAKES BLVD
 202
 City SUNRISE State FL Zip Code 33322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A91980A7E4FF042F0800
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BORGENDALE, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9540 SUNRISE LAKES BLVD
 202
 City SUNRISE State FL Zip Code 33322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A72EA3F2230154D78BD5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BORKOWSKI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3318 W 11TH AVE PLACE
 City BROOMFIELD State CO Zip Code 80020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEGRITY FINANCIAL Occupation (for Individual) V.P.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A5E2654CE395C4EEF89A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BORKOWSKI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3318 W 11TH AVE PLACE
 City BROOMFIELD State CO Zip Code 80020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEGRITY FINANCIAL Occupation (for Individual) V.P.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A6C251346274E46F6ACA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BORMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 974 MONTEGO E
 City VENICE State FL Zip Code 34285
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A79828D5855F2409BAE7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BORSHEIM, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4821 CORONADO AVE.
 City SAN DIEGO State CA Zip Code 92107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERT ENVIROMENTAL Occupation (for Individual) ENVIRONMENTAL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 04 / 2021
Transaction ID : ABB6A1A83BE894C35B5C
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. BORSHEIM, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4821 CORONADO AVE.
 City SAN DIEGO State CA Zip Code 92107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERT ENVIROMENTAL Occupation (for Individual) ENVIRONMENTAL CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : A509DABED443244EFB94
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 237 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOSSI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 BROOKSIDE LANE
 City NORTH SALEM State NY Zip Code 10560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHERN WESTCHESTER BUILDERS INC Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AC5294FADAF634B30BBA
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BOSTIC, MICHAEL, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1076 SILVER HILLS DRIVE
 City SENATOBIA State MS Zip Code 38668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A19A2087056394AE282A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BOSTON, WILLARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 LIMESTONE ROAD
 City CHAPIN State SC Zip Code 29036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ACBF4B8C7529E4A6CB87
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 238 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOSWELL, WEBB A, , , JR

Mailing Address PO BOX 202

City NOXAPATER	State MS	Zip Code 39346
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

Transaction ID : A9682D815EFB14F60AC9

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOSWELL, WEBB A, , , JR

Mailing Address PO BOX 202

City NOXAPATER	State MS	Zip Code 39346
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2021

Transaction ID : AC9DC048E0F3A4194A37

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BOSWELL, WEBB A, , , JR

Mailing Address PO BOX 202

City NOXAPATER	State MS	Zip Code 39346
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2021

Transaction ID : A89B1C9A448D844FE88F

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOUNDS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 339 TIMBER BAY DR
 City COTTAGEVILLE State SC Zip Code 29435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A0E9CDEE6B47540CDAE5
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BOWE, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4766 HORSE DRAWN WAY
 City SUMMERVILLE State SC Zip Code 29485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARGOGLIDE Occupation (for Individual) VP BUSINESS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.40

Date of Receipt 05 / 11 / 2021
Transaction ID : A2647E564C8E34A0C9B8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BOWE, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4766 HORSE DRAWN WAY
 City SUMMERVILLE State SC Zip Code 29485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARGOGLIDE Occupation (for Individual) VP BUSINESS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.40

Date of Receipt 06 / 11 / 2021
Transaction ID : AEA6EEFA3BD1C4678BB1
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 240 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOWEN, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 WENTWOOD DR.
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2021
Transaction ID : AF63F789B8EB141B0813
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BOWEN, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 WENTWOOD DR.
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2021
Transaction ID : A66EB137B762F40FD8C3
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BOWEN, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 WENTWOOD DR.
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : AE14A4B5F39324D488AA
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOWEN, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 WENTWOOD DR.
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A70E575B4DF074454BF3
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BOWEN, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 WENTWOOD DR.
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A6952A6A8BE1B49A4B34
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. BOWEN, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3312 WENTWOOD DR.
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A3EFAA7D4E4EF4D0DA87
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 242 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

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

Mailing Address 3312 WENTWOOD DR.

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2021

Transaction ID : AB3F7E6C21EAC423E9D8

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 3312 WENTWOOD DR.

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2021

Transaction ID : A10D8FE18310144B4B4A

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3312 WENTWOOD DR.

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : AA7380A04043744369F7

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

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

Mailing Address 3312 WENTWOOD DR.

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : A55AC411E240B45AEB44

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3312 WENTWOOD DR.

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : A11BD264FA4F24869920

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 3312 WENTWOOD DR.

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : AD80F979DF75C4D6AAC4

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOWES, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2621 22ND AVE
 City BROOKINGS State SD Zip Code 57006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A61F16380BB0F42E1850
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BOWES, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2621 22ND AVE
 City BROOKINGS State SD Zip Code 57006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A4CF399B374794153BC7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BOWHALL, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 ELSBREE LN
 City WINDSOR State CA Zip Code 95492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AD70827D83C92485C892
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 245 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOWMAN, BRYON, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 CRESTVIEW DR
 City GENESEO State IL Zip Code 61254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUNDA CONSTRUCTION Occupation (for Individual) FIELD MECHANIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A76B804A0AB584BC5AF9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BOWMAN, BRYON, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 CRESTVIEW DR
 City GENESEO State IL Zip Code 61254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUNDA CONSTRUCTION Occupation (for Individual) FIELD MECHANIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AB3E00F3D54234E65AAE
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BOWMAN, BRYON, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 CRESTVIEW DR
 City GENESEO State IL Zip Code 61254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUNDA CONSTRUCTION Occupation (for Individual) FIELD MECHANIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AB3C0D6CA1C714D878D1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 246 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOWSER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3140

City DILLON	State CO	Zip Code 80435
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2021

Transaction ID : AA9B6A139FADD492594C

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address PO BOX 3140

City DILLON	State CO	Zip Code 80435
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : A871DA5E275E64257A47

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address PO BOX 3140

City DILLON	State CO	Zip Code 80435
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2021

Transaction ID : A3905DF0AF30B4FF8876

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOYER, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5048 VENTANA VIEW RD
 City LAS CRUCES State NM Zip Code 88011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A16ADDA3A5554443886E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BRACKEN, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 HAMVASY
 City TYLER State TX Zip Code 75701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRACKEN INTEREST Occupation (for Individual) OIL AND GAS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A8B96FB9BE51F40A18ED
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BRACKETT, PATRICK, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 COLLEGE ST.
 City JACKSONVILLE State FL Zip Code 32204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AD04C808C7EE94551961
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 248 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRADDOCK, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5961 SAWYER RD
 City SAWYER State MI Zip Code 49125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AD46006EC459F439A87A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BRADDOCK, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5961 SAWYER RD
 City SAWYER State MI Zip Code 49125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : AD4C150F686A44D02AE7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BRADER, JOEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6620 CHAPPARAL DR NE
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A5513FCE1267C450B8C2
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 249 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRADER, JOEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6620 CHAPPARAL DR NE
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A72B67C704975469CBD5
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BRADER, JOEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6620 CHAPPARAL DR NE
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : AC00830EFB21F438FBE3
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BRANNON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 489 EAST FREEMAN STREET
 City MAYSVILLE State GA Zip Code 30558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AF5EEB4ABE709439983A
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRANNON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 489 EAST FREEMAN STREET
 City MAYSVILLE State GA Zip Code 30558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A28302D43F11B42EA889
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BRAVERMAN, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39636 BORDEAUX PL
 City MURRIETA State CA Zip Code 92562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER Occupation (for Individual) HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A66E57CE6FE7D454B80E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BRECK, DALE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19588 N TULLY RD
 City LOCKEFORD State CA Zip Code 95237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AC737E750428F4EE98B9
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BREITNER, EDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PINE DR. N.
 City ROSLYN State NY Zip Code 11576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : ADFFC66A099DD4A1FA9A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BRENNAN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 S OCEAN BLVD
 City LAKE WORTHLANTANA State FL Zip Code 33462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A0C563D0C2CF64056A59
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRENNAN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 S OCEAN BLVD
 City LAKE WORTHLANTANA State FL Zip Code 33462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 04 / 2021
Transaction ID : AD7A0BCA396EF4B1997F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 252 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRENNAN, PATRICIA, , ,

Mailing Address **1600 S OCEAN BLVD**

City **LAKE WORTHLANTANA** State **FL** Zip Code **33462**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt
05 / 25 / 2021

Transaction ID : AFD155DAF82A64851BD6

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address **1600 S OCEAN BLVD**

City **LAKE WORTHLANTANA** State **FL** Zip Code **33462**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
06 / 04 / 2021

Transaction ID : A3D17B9E7A6DB47DA910

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address **1188 KINGSTON LANE**

City **VENTURA** State **CA** Zip Code **93001**

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
05 / 27 / 2021

Transaction ID : A8085694B488B40DB8EE

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **110.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BREWER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1188 KINGSTON LANE
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A0D63C9C1F1C04072B0B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BREZNAY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 SUN RD
 City WASHBURN State IL Zip Code 61570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 04 / 2021
Transaction ID : A4DF48851B4FE410FB0F
 Amount of Each Receipt this Period 250.00
 Memo Item

C. BREZNAY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 SUN RD
 City WASHBURN State IL Zip Code 61570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 04 / 2021
Transaction ID : A9D716E4461CC4636AF8
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BREZNAY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 SUN RD
 City WASHBURN State IL Zip Code 61570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : A0E684B3650A94B9DBDE
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BREZNAY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1258 SUN RD
 City WASHBURN State IL Zip Code 61570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2021
Transaction ID : A2832BB594B3547F7827
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. BRICE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 SW 69TH STREET
 City OKLAHOMA CITY State OK Zip Code 73159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A8FAFC409C77244BFA29
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 255 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRICE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 SW 69TH STREET
 City OKLAHOMA CITY State OK Zip Code 73159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A474466F2598A4730B2B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222
 City DURANGO State CO Zip Code 81303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 06 / 2021
Transaction ID : AD50633DA6F464B50B1F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222
 City DURANGO State CO Zip Code 81303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 17 / 2021
Transaction ID : AA4F5F87C90CC4E11B27
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222

City DURANGO	State CO	Zip Code 81303
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2021

Transaction ID : A5D1B42273C124D06B2E

Amount of Each Receipt this Period
 35.00

Memo Item

B. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222

City DURANGO	State CO	Zip Code 81303
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021

Transaction ID : A1E6039BFF03D4B3A9B6

Amount of Each Receipt this Period
 50.00

Memo Item

C. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222

City DURANGO	State CO	Zip Code 81303
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021

Transaction ID : AC64D801AA7144D5B93C

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222

City DURANGO	State CO	Zip Code 81303
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 05 / 17 / 2021
Transaction ID : AD81163AC9BBE43989E9

Amount of Each Receipt this Period
 50.00

Memo Item

B. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222

City DURANGO	State CO	Zip Code 81303
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 06 / 06 / 2021
Transaction ID : A22572211878347858A4

Amount of Each Receipt this Period
 35.00

Memo Item

C. BRICKER, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 CR 222

City DURANGO	State CO	Zip Code 81303
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 06 / 17 / 2021
Transaction ID : A4E633DB518384917AAE

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 258 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BRIGGS, ERNEST, , ,

Mailing Address **401 MEADOW LN**

City DENTON	State TX	Zip Code 76207
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2021

Transaction ID : A250720DEC53948C1837

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address **1313 CR 447**

City PRINCETON	State TX	Zip Code 75407
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2021

Transaction ID : A1D14495737D84E9A97D

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address **1313 CR 447**

City PRINCETON	State TX	Zip Code 75407
--------------------------	--------------------	--------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2021

Transaction ID : A3D2EE8F60C934BA4988

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRIMMER, MARYANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2048 OAKSIDE RD.
 City TOLEDO State OH Zip Code 43615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : A4389EA1780324BC5A80
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BRIMMER, MARYANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2048 OAKSIDE RD.
 City TOLEDO State OH Zip Code 43615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2021
Transaction ID : AAB30015D863C4820A53
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BRISKEY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5615 WATERCREST DR
 City GREENSBORO State NC Zip Code 27407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSTON HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2021
Transaction ID : A8073B744F2CD4319B8D
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRISKEY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5615 WATERCREST DR
 City GREENSBORO State NC Zip Code 27407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSTON HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 02 / 04 / 2021
Transaction ID : A9CE9B5EB92A14E9A987
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BRISKEY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5615 WATERCREST DR
 City GREENSBORO State NC Zip Code 27407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSTON HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 08 / 2021
Transaction ID : A929244045FBC4AA1A2B
 Amount of Each Receipt this Period 75.00
 Memo Item

C. BRISKEY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5615 WATERCREST DR
 City GREENSBORO State NC Zip Code 27407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSTON HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 03 / 08 / 2021
Transaction ID : A939EF61210D14822B2A
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 261 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRISKEY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5615 WATERCREST DR
 City GREENSBORO State NC Zip Code 27407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSTON HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2021
Transaction ID : A2DC8566136E04A91A6A
 Amount of Each Receipt this Period 75.00
 Memo Item

B. BRISKEY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5615 WATERCREST DR
 City GREENSBORO State NC Zip Code 27407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSTON HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : AC41F6F5F40F14644A4C
 Amount of Each Receipt this Period 75.00
 Memo Item

C. BRISKEY, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5615 WATERCREST DR
 City GREENSBORO State NC Zip Code 27407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHNSTON HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A3160D02E08D14E9093D
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRISTOW, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10170 SIENA OAKS CIR E
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : AC164FA48EE104659827
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BRISTOW, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10170 SIENA OAKS CIR E
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : AED3A3EB2E92249EDB56
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRITT, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11620 HASTY RD
 City LAURINBURG State NC Zip Code 28352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPES Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 14 / 2021**
Transaction ID : AC5B9CAADF82E4732ACC
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRITT, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11620 HASTY RD
 City LAURINBURG State NC Zip Code 28352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPES Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A2B0D101D79114145AB8
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BRITT, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11620 HASTY RD
 City LAURINBURG State NC Zip Code 28352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPES Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AE0A2A51D66F14B7CA07
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BRITT, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11620 HASTY RD
 City LAURINBURG State NC Zip Code 28352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPES Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A68964129BBB04B72AB6
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 264 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRITT, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1674 THOMAS RD
 City LEXINGTON State NC Zip Code 27295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AE576C847BE1C4DBE95F
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. BROADBENT, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2471 CHESTNUT ST
 City NORTH DIGHTON State MA Zip Code 02764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERKIN ELMER Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : AE847497105ED42F1BF0
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BROADBENT, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2471 CHESTNUT ST
 City NORTH DIGHTON State MA Zip Code 02764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERKIN ELMER Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : AFFC3351C826E49DEBF2
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 265 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROCIOSUS, QUAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 MT TOM LN
 City WELLSBORO State PA Zip Code 16901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A68F3504058B8489685C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BROCK, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 2128
 City EASLEY State SC Zip Code 29641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A5C5447FB5FE948C2A7F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRODOWSKY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2756 W. RIVER DR.
 City GLADWIN State MI Zip Code 48624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AB487C43F1EF04AFE892
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 266 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRODOWSKY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2756 W. RIVER DR.
 City GLADWIN State MI Zip Code 48624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AB211D85E46184C4281F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BROKAW, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29407 61ST AVE S
 City AUBURN State WA Zip Code 98001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AB34BF8D7588842829BB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BROOKES, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 986 EUCLID AVENUE
 City BERKELEY State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A912A3AD6AD7C4D129C1
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROOKES, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 986 EUCLID AVENUE
 City BERKELEY State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A053E900008684DF9BA7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BROOKS, BARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HERON OAKS COURT
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2021
Transaction ID : AA937BF76EA7C42F0AF8
 Amount of Each Receipt this Period 250.00
 Memo Item

C. BROOKS, BARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HERON OAKS COURT
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A6880A70E3E2646F6ABC
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 535.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 268 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROOKS, BARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HERON OAKS COURT
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021
Transaction ID : AF8B8B6E3B2974D67ADC
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BROOKS, BARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HERON OAKS COURT
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A92EE0C5544294B48900
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. BROOKS, BARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HERON OAKS COURT
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : AF2628BF5DF8C4AC3BA1
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROOKS, BARI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 HERON OAKS COURT
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AFB11CCDD69164B7EB8E
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BROTHERS, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14033 CRESTONE CIRCLE
 City BROOMFIELD State CO Zip Code 80023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OXLO SYSTEMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2021
Transaction ID : A5A937283ABAD432C8B2
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BROTHERS, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14033 CRESTONE CIRCLE
 City BROOMFIELD State CO Zip Code 80023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OXLO SYSTEMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 13 / 2021
Transaction ID : AD475DC9202DC4C69952
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 270 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROTHERS, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14033 CRESTONE CIRCLE
 City BROOMFIELD State CO Zip Code 80023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OXLO SYSTEMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A804D31D510074948848
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BROTHERS, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14033 CRESTONE CIRCLE
 City BROOMFIELD State CO Zip Code 80023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OXLO SYSTEMS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : AD127B4E30DD14537A15
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BROWN, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7420 HICKORY AVE
 City ORANGEVALE State CA Zip Code 95662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A318319554D4E42AC839
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7420 HICKORY AVE
 City ORANGEVALE State CA Zip Code 95662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AB8BB8C73EC784E6B9E3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BROWN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1710 EASTFIELD DR
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE, USA Occupation (for Individual) SOLUTION ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2021
Transaction ID : A834A4F5EAEF54AD7875
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BROWN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1710 EASTFIELD DR
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE, USA Occupation (for Individual) SOLUTION ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 23 / 2021
Transaction ID : AE518CECAACD04BB8B42
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 272 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1710 EASTFIELD DR
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE, USA Occupation (for Individual) SOLUTION ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : ABAAC575D6A06470A916
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BROWN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1710 EASTFIELD DR
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE, USA Occupation (for Individual) SOLUTION ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A9B9F8E95E6724CBBA18
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BROWN, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2950 ANGELETTE DR
 City AUSTELL State GA Zip Code 30106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DIXIE PRECAST INC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : AA449A3C50B1F48A6A42
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, FRANKLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2950 ANGELETTE DR
 City AUSTELL State GA Zip Code 30106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DIXIE PRECAST INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A5781D187933849E8BA2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BROWN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3567 WILLIE SIMMONS ROAD
 City FALLS OF ROUGH State KY Zip Code 40119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A93A954F10E5B4C7DB9B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BROWN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3567 WILLIE SIMMONS ROAD
 City FALLS OF ROUGH State KY Zip Code 40119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 26 / 2021
Transaction ID : A408C91516B35449CAA1
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3567 WILLIE SIMMONS ROAD
 City FALLS OF ROUGH State KY Zip Code 40119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A35E4DEF0E0B44702A75
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BROWN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3567 WILLIE SIMMONS ROAD
 City FALLS OF ROUGH State KY Zip Code 40119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A04876A49D19D40858C7
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BROWN, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 CORA MARIE COVE
 City PFLUGERVILLE State TX Zip Code 78660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : A0F3D2BDCA7DE4E1E9B7
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1411 CORA MARIE COVE
 City PFLUGERVILLE State TX Zip Code 78660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **03 / 04 / 2021**
Transaction ID : A9F6BC11AF1AF40AC861
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BROWN, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1054 EAST 52 ST PVT
 City BROOKLYN State NY Zip Code 11234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINGS COUNTY HOSPITAL Occupation (for Individual) MEDICAL RECORDS SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : AB938AD58A8FD413AA59
 Amount of Each Receipt this Period 15.00
 Memo Item

C. BROWN, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1054 EAST 52 ST PVT
 City BROOKLYN State NY Zip Code 11234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINGS COUNTY HOSPITAL Occupation (for Individual) MEDICAL RECORDS SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **06 / 27 / 2021**
Transaction ID : AFFB3C0938B7E42F3A6D
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 276 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 N. TUSTIN #120

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021

Transaction ID : AFA0CED8295D14895A4C

Amount of Each Receipt this Period
50.00

Memo Item

B. BROWN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 N. TUSTIN #120

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021

Transaction ID : AC7495A6396684ACA9DC

Amount of Each Receipt this Period
50.00

Memo Item

C. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881

City CUSHING	State OK	Zip Code 74023
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2021

Transaction ID : A5EEDDF59BF1D4A98BA5

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 277 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881

City CUSHING	State OK	Zip Code 74023
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2021
Transaction ID : A71F0A5B200DD4DFB8B3

Amount of Each Receipt this Period
 50.00

Memo Item

B. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881

City CUSHING	State OK	Zip Code 74023
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : AA5E4FCD7F63D4435B7A

Amount of Each Receipt this Period
 100.00

Memo Item

C. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881

City CUSHING	State OK	Zip Code 74023
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : ABDB9F85C1C1C48E39E2

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881
 City CUSHING State OK Zip Code 74023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : A0E6163E7E6F54A0EBF9
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881
 City CUSHING State OK Zip Code 74023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : AA5DFE854B36B4EAB93F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881
 City CUSHING State OK Zip Code 74023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : A1AFD983AD6C64287A55
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 279 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881

City CUSHING	State OK	Zip Code 74023
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A73D49D9787D34B9188D

Amount of Each Receipt this Period
 50.00

Memo Item

B. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881

City CUSHING	State OK	Zip Code 74023
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2021
Transaction ID : A13B6C9E8BEC94C82BBD

Amount of Each Receipt this Period
 100.00

Memo Item

C. BROWN, SHERRIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 881

City CUSHING	State OK	Zip Code 74023
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : AE6C5AC8D4590405CBDD

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, SKIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 NEW FOREST

City LONGVIEW	State TX	Zip Code 75601
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2021

Transaction ID : AAC4A7D8C64BA4AE09FE

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 6 NEW FOREST

City LONGVIEW	State TX	Zip Code 75601
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2021

Transaction ID : ABCB5D45CC90C4B63B1E

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 2 NORTHWIND COURT

City NEWPORT BEACH	State CA	Zip Code 92663
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2021

Transaction ID : A5B7C74381AA44EC2B73

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 NORTHWIND COURT
 City NEWPORT BEACH State CA Zip Code 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A3F26D802F72C4C50836
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BRUDER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 REED ROAD SUITE 301
 City BROOMALL State PA Zip Code 19008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A3EAB3F07417645B7BA0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRUDER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 REED ROAD SUITE 301
 City BROOMALL State PA Zip Code 19008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AA2ABE949A55E4743AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRUNER, ELOISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 EXTON DR
 City FALLSTON State MD Zip Code 21047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **04 / 08 / 2021**
Transaction ID : ADF A12A3B731C452684A
 Amount of Each Receipt this Period 20.00
 Memo Item

B. BRUNER, ELOISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 EXTON DR
 City FALLSTON State MD Zip Code 21047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **04 / 09 / 2021**
Transaction ID : A5AC9F371F3184571A51
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRUNER, ELOISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 EXTON DR
 City FALLSTON State MD Zip Code 21047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **05 / 08 / 2021**
Transaction ID : A3A01327244164A079AE
 Amount of Each Receipt this Period 20.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRUNER, ELOISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 EXTON DR
 City FALLSTON State MD Zip Code 21047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A5A3B8E20EAA44759AE7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BRUNK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 WILDERNESS DR
 City HILLSBORO State MO Zip Code 63050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A16661AB5A1834EDB858
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRUNK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 WILDERNESS DR
 City HILLSBORO State MO Zip Code 63050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A3157BD500C904C6D8D0
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRUNK, RENEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1030 BANBURY COURT
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 26 / 2021**
Transaction ID : A1CA4B9783ADC43D7B27
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BRUNO, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PORTOFINO DR
 City NOKOMIS State FL Zip Code 34275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : AC44002A697EB4890909
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BRUNO, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PORTOFINO DR
 City NOKOMIS State FL Zip Code 34275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 08 / 2021**
Transaction ID : AF41F90DC63DE41BCA7C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRUNO, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PORTOFINO DR
 City NOKOMIS State FL Zip Code 34275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A480B0F4C72C4487482B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BRUNO, VITO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 GENOVA COURT
 City FARMINGDALE State NY Zip Code 11735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUNO INVESTIGATION,INC Occupation (for Individual) PRIVATE INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AC797948DBBCA4D89AC7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BRUSENHAN, ALICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 ELIZABETH ROAD
 City SAN ANTONIO State TX Zip Code 78209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : AD1A4107D5CED40E8B60
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRYAN, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 SOUTH MAIN ST
 City MANCHESTER State NH Zip Code 03102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : AE0751A4C8F6A47ED891
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BRYAN, EVELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 SOUTH MAIN ST
 City MANCHESTER State NH Zip Code 03102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AC8D6D52C70104866AA0
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BRYANT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 DEL CIELO WAY
 City MODESTO State CA Zip Code 95356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A9CB00065AE46469BB95
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 287 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRYANT, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 DEL CIELO WAY
 City MODESTO State CA Zip Code 95356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A81ABE57512E9484CAC3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BRYSON, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 131717
 City SPRING State TX Zip Code 77393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INS. BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A9CB4C062101A466E9B7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRYSON, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 131717
 City SPRING State TX Zip Code 77393
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INS. BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A90225CD7D3194F389BB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 288 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUCHANAN, ROBBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 GODLEY ROAD
 City SAINT HELENA ISLAND State SC Zip Code 29920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 11 / 2021
Transaction ID : AE80501F92A0148C4BE7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BUCHANAN, ROBBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 GODLEY ROAD
 City SAINT HELENA ISLAND State SC Zip Code 29920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A5DDD7A306B9E44F5B49
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BUCHANAN, ROBBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 GODLEY ROAD
 City SAINT HELENA ISLAND State SC Zip Code 29920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A248E0B44DE0C41F6942
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 289 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUCHANAN, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5672 NEUMANN R9
 City FRUITLAND State WA Zip Code 99129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A4CD400A93F404D9F980
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BUCHER, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SAPPHIRE PT
 City MORTON State IL Zip Code 61550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 21 / 2021**
Transaction ID : AB5D57D4D2E5148B3B76
 Amount of Each Receipt this Period 250.00
 Memo Item

C. BUCHER, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SAPPHIRE PT
 City MORTON State IL Zip Code 61550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 21 / 2021**
Transaction ID : A126C30FB7E60477EAEA
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 290 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUCHER, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SAPPHIRE PT
 City MORTON State IL Zip Code 61550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2021
Transaction ID : AB45A8F251D3041FD8AB
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BUELL, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MORNINGCREST COURT
 City SPRING State TX Zip Code 77389
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A565D1A6D4FF64478969
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. BUETTNER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10406 SORRELL DR.
 City MANASSAS State VA Zip Code 20110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A957BD4178F8D43CAA2C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 291 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUETTNER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10406 SORRELL DR.
 City MANASSAS State VA Zip Code 20110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AD68D262AFC3A4A928B9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BUETTNER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10406 SORRELL DR.
 City MANASSAS State VA Zip Code 20110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A89E608EAD606400C8D1
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BUFFUM, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 S DICKSON ST
 City KEENESBURG State CO Zip Code 80643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AD0E0BCB4D4EE4570BA5
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 292 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUFFUM, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 S DICKSON ST

City KEENESBURG	State CO	Zip Code 80643
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021

Transaction ID : A4CA44E83D4F74B4990F

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 135 S DICKSON ST

City KEENESBURG	State CO	Zip Code 80643
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021

Transaction ID : A1334BE5DD6C14B6AA3D

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address PTY 6528 BOX 025724

City MIAMI	State FL	Zip Code 33102
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021

Transaction ID : AC4CB843522474B38B9D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUMGARNER, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PTY 6528 BOX 025724

City MIAMI	State FL	Zip Code 33102
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A000751572C5B4120ADD

Amount of Each Receipt this Period
50.00

Memo Item

B. BUNN, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11501 BAKERS CROSSING ROAD

City BLUFF DALE	State TX	Zip Code 76433
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : AE0CC05F43F864265A17

Amount of Each Receipt this Period
35.00

Memo Item

C. BURGESS, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 GALLOWAY DR SE

City LEESBURG	State VA	Zip Code 20175
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AFC73499429264FF0A56

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 294 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURGESS, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 GALLOWAY DR SE
 City LEESBURG State VA Zip Code 20175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : A57AFDA38592D4A35BA0
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BURGESS, JOHN, J., , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27758 SANTA MARGARITA PARKWAY 284
 City MISSION VIEJO State CA Zip Code 92691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BURGESS ENGINEERING GROUP Occupation (for Individual) CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 24 / 2021**
Transaction ID : AE7F141E372674AA4ABA
 Amount of Each Receipt this Period 200.00
 Memo Item

C. BURGIS, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3A 2ND AVENUE
 City ISLE OF PALMS State SC Zip Code 29451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WINDJAMMER Occupation (for Individual) GM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 04 / 2021**
Transaction ID : A38ADA7880C454E83A61
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 295 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURGIS, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3A 2ND AVENUE

City ISLE OF PALMS	State SC	Zip Code 29451
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) THE WINDJAMMER	Occupation (for Individual) GM
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2021
Transaction ID : A86626F51E424408583D

Amount of Each Receipt this Period
100.00

Memo Item

B. BURGIS, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3A 2ND AVENUE

City ISLE OF PALMS	State SC	Zip Code 29451
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) THE WINDJAMMER	Occupation (for Individual) GM
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : A169EF321AEFD4A70809

Amount of Each Receipt this Period
50.00

Memo Item

C. BURGIS, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3A 2ND AVENUE

City ISLE OF PALMS	State SC	Zip Code 29451
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE WINDJAMMER	Occupation (for Individual) GM
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2021
Transaction ID : AA436B320B5B440C7983

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURGIS, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3A 2ND AVENUE

City ISLE OF PALMS	State SC	Zip Code 29451
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE WINDJAMMER	Occupation (for Individual) GM
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : ADEF03BD62BE24AEA85C

Amount of Each Receipt this Period
50.00

Memo Item

B. BURG, MARGUERITE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13302 W CASTLE ROCK DRIVE

City SUN CITY WEST	State AZ	Zip Code 85375
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : AB934521064FE4413842

Amount of Each Receipt this Period
50.00

Memo Item

C. BURG, MARGUERITE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13302 W CASTLE ROCK DRIVE

City SUN CITY WEST	State AZ	Zip Code 85375
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AC3EF209FB0FA4645BB6

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 297 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKE, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12977 LA ROCHELLE CIRCLE
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J&J Occupation (for Individual) PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 28 / 2021
Transaction ID : A36C437AE43504610B87
 Amount of Each Receipt this Period 45.00
 Memo Item

B. BURKE, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12977 LA ROCHELLE CIRCLE
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J&J Occupation (for Individual) PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 03 / 29 / 2021
Transaction ID : AE463D1C3202C49348D3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BURKE, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12977 LA ROCHELLE CIRCLE
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J&J Occupation (for Individual) PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 05 / 28 / 2021
Transaction ID : AD24CB2E25C7049C7A49
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 298 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKE, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12977 LA ROCHELLE CIRCLE
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J&J Occupation (for Individual) PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A35FF0ACA5B884598B5F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AND REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 02 / 2021
Transaction ID : AAA5E5796944448CD9C8
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AND REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A90149C33888147DCB36
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 299 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AND REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : A457E44559D4142C589E
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AND REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A25F0ABA290D54F06851
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BURKE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 E MAIN ST
 City DAVIS State OK Zip Code 73030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AND REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A73AD9B5F6D524CCE813
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 300 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 SEA HILL RD

City NORTH BRANFORD	State CT	Zip Code 06471
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2021

Transaction ID : A4E50D441E3D249D8AB2

Amount of Each Receipt this Period
50.00

Memo Item

B. BURKE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 SEA HILL RD

City NORTH BRANFORD	State CT	Zip Code 06471
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2021

Transaction ID : A87AD6A4CA9164BAF99E

Amount of Each Receipt this Period
50.00

Memo Item

C. BURKET, DENNIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12756 DUNNINGS HWY
SUITE 3

City CLAYSBURG	State PA	Zip Code 16625
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2021

Transaction ID : A09A0A7F7A8734286AFB

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 301 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKET, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12756 DUNNINGS HWY
 SUITE 3
 City CLAYSBURG State PA Zip Code 16625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2021
Transaction ID : A0BE3953025BF42EB805
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. BURKET, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12756 DUNNINGS HWY
 SUITE 3
 City CLAYSBURG State PA Zip Code 16625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A79A7250CFCD043C3A21
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BURKET, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12756 DUNNINGS HWY
 SUITE 3
 City CLAYSBURG State PA Zip Code 16625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A2DA90CB0F7C7424B88F
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKET, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12756 DUNNINGS HWY
 SUITE 3
 City CLAYSBURG State PA Zip Code 16625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 24 / 2021
Transaction ID : ACECF5BC3B587424FA68
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BURKET, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12756 DUNNINGS HWY
 SUITE 3
 City CLAYSBURG State PA Zip Code 16625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 06 / 24 / 2021
Transaction ID : ABC45001BB13A44F9A85
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BURKETT, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8762 WEEDON LOOP
 City BRYAN State TX Zip Code 77808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A9FE35844A8504200A6C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 762
 City FAIRBORN State OH Zip Code 45324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDLERS Occupation (for Individual) MINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A22376453D2BB4097A2F
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. BURKETT, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 762
 City FAIRBORN State OH Zip Code 45324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDLERS Occupation (for Individual) MINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A2B3EF1DA0C994256B82
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2021
Transaction ID : ABCE36C91A3C24F079C1
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 01 / 15 / 2021
Transaction ID : A5816EE79444D4DBA87D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 01 / 15 / 2021
Transaction ID : ACF513022B80049AEA18
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 01 / 15 / 2021
Transaction ID : A13EC8A2E75CA4EA08B0
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 01 / 15 / 2021
Transaction ID : A753A2F848B4540DAB0B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 02 / 15 / 2021
Transaction ID : A6AD42316FAC4470D83F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A880F0C39D37A430EB52
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 306 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : AA3D83275E91B4D4EAEC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BURKS, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 DUNBARTON DRIVE
 City NASHUA State NH Zip Code 03063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : A1C081075EC0046B4A41
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BURNS, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12027 CANBERRA PLACE
 City CHARLOTTE State NC Zip Code 28227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY POWER SOLUTIONS, INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : A3AA3013B7C6847D8BBF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 3012		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURNS, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12027 CANBERRA PLACE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUALITY POWER SOLUTIONS, INC	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A6AE6899E11B54B05A3E

Amount of Each Receipt this Period
50.00

Memo Item

B. BURNS, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12027 CANBERRA PLACE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUALITY POWER SOLUTIONS, INC	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A78E36B7FE42F4C6592D

Amount of Each Receipt this Period
50.00

Memo Item

C. BURNS, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CAROL WIND

City ALISO VIEJO	State CA	Zip Code 92656
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN PRESIDENT LINES	Occupation (for Individual) UNITED STATES MERCHANT MARINE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2021
Transaction ID : A0DAE1A79D99A4F479E1

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURNS, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CAROL WIND
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN PRESIDENT LINES Occupation (for Individual) UNITED STATES MERCHANT MARIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **03 / 24 / 2021**
Transaction ID : AC29C6BCE03EE4B69B55
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BURNS, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CAROL WIND
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN PRESIDENT LINES Occupation (for Individual) UNITED STATES MERCHANT MARIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 09 / 2021**
Transaction ID : A8BAA00B522244AAA14
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BURNS, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 CAROL WIND
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN PRESIDENT LINES Occupation (for Individual) UNITED STATES MERCHANT MARINE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : A92872DF7AB7C47D1925
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 309 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4065 BRUING STREET
 City NORTH PORT State FL Zip Code 34286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : AD4C8C855A0A142BEBD4
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BURR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4065 BRUING STREET
 City NORTH PORT State FL Zip Code 34286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AB3C7BA70408C48FABAD
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. BURTON, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 CAMDEN ROAD
 City ALTAMONTE SPRINGS State FL Zip Code 32714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCFD Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : AF376277DEC364B9FA35
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURTON, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 CAMDEN ROAD
 City ALTAMONTE SPRINGS State FL Zip Code 32714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCFD Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AC73D42047F9F44079B0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BURTON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4312 CAMELOT DR
 City VICKSBURG State MS Zip Code 39180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A71D5D70CFD8B4C7A9D7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BUTCHER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 186
 City STILLWATER State NJ Zip Code 07875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUTCHER & BUONOMO Occupation (for Individual) CPA/ CGMA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2021
Transaction ID : AC31BA58C1BA3485D915
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUTCHER, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 186
 City STILLWATER State NJ Zip Code 07875
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUTCHER & BUONOMO Occupation (for Individual) CPA/ CGMA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A1526211A12E34F71B09
 Amount of Each Receipt this Period 50.00
 Memo Item

B. BUTLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11831 BUCKHORN RD
 City CHESTERFIELD State VA Zip Code 23838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DISASTER RESTORATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A7B3AD361166F49F9AC5
 Amount of Each Receipt this Period 75.00
 Memo Item

C. BUTLER, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1863 WITHMERE WAY
 City ATLANTA State GA Zip Code 30338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WENDY BUTLER & ASSOCIATES, LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A8A85EDEC3D7B4052953
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 312 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUTTS, CAROL, PENNY, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 BEAR WOODS

City POWELL	State OH	Zip Code 43065
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021

Transaction ID : A4D93A8268F4343D9984

Amount of Each Receipt this Period
45.00

Memo Item

B. BUTTS, CAROL, PENNY, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 BEAR WOODS

City POWELL	State OH	Zip Code 43065
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021

Transaction ID : A7780CF5FFC9B4E49893

Amount of Each Receipt this Period
45.00

Memo Item

C. BUTTS, CAROL, PENNY, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 322 BEAR WOODS

City POWELL	State OH	Zip Code 43065
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021

Transaction ID : A9E8255A0B05B4B6C849

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BYERLY, O, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16532 CARLA ST
 City EAGLE RIVER State AK Zip Code 99577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : AC45359A634A049B3820
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BYERS, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 PATCHWORK DR
 City LADSON State SC Zip Code 29456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : ADA7416E360E8425B86F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BYRD, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 DOUBLE EAGLE DR.
 City BLUFFTON State SC Zip Code 29910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 05 / 2021
Transaction ID : AD390696DF5D74366B9C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BYRD, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 DOUBLE EAGLE DR.
 City BLUFFTON State SC Zip Code 29910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A6BEB0B27015F402FAE2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CAGLE, GILES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 ROGERS ROAD
 City CORDOVA State TN Zip Code 38018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : AB0810382BA0046E2A57
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. CAGLE, GILES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 ROGERS ROAD
 City CORDOVA State TN Zip Code 38018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A3385AB5D5F1742328C0
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 315 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAGLE, GILES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 ROGERS ROAD

City CORDOVA	State TN	Zip Code 38018
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

Transaction ID : A3EFA4103FF15441E8DE

Amount of Each Receipt this Period
35.00

Memo Item

B. CAGLE, GILES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 ROGERS ROAD

City CORDOVA	State TN	Zip Code 38018
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2021

Transaction ID : AB5AEAA78F055495E9B5

Amount of Each Receipt this Period
50.00

Memo Item

C. CAGLE, GILES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 ROGERS ROAD

City CORDOVA	State TN	Zip Code 38018
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2021

Transaction ID : AAF6AB0B473604FD3BDA

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CAGLE, GILES, , ,

Mailing Address 1100 ROGERS ROAD

City CORDOVA	State TN	Zip Code 38018
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021

Transaction ID : A88E9BAFFAF4843B194A

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CAGLE, GILES, , ,

Mailing Address 1100 ROGERS ROAD

City CORDOVA	State TN	Zip Code 38018
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021

Transaction ID : A9F50A64537064009B50

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CAHOON, GORDON, , ,

Mailing Address 708 TWIN VIEW PLACE

City BREMERTON	State WA	Zip Code 98312
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021

Transaction ID : AA5130C1D62A84BDC88D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAIRNS, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5552 ASH GROVE CIR
 City MONTGOMERY State AL Zip Code 36116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **06 / 27 / 2021**
Transaction ID : A8FD8C2D065F74051A1C
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CAIRNS, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 130
 City KENAI State AK Zip Code 99611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 20 / 2021**
Transaction ID : A5C0A06F4748846A1B26
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CAIRNS, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 130
 City KENAI State AK Zip Code 99611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 20 / 2021**
Transaction ID : A00F853569B5045C4B4B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 318 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CALABRESE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 WASHINGTON ST.
 City ALBION State NY Zip Code 14411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A951EF8CCA1B041AE92A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CALABRESE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 310 WASHINGTON ST.
 City ALBION State NY Zip Code 14411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : AFAAA3EF989D946CFB8A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CALAHAN, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4037 SADDLE TRAIL
 City ROBSTOWN State TX Zip Code 78380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOE CALAHAN CONSULTANT LLC Occupation (for Individual) BOOKKEEPING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AC4261639CD784A92AF1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CALAMIA, FRANK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 PADOVA DRIVE
 City SALINAS State CA Zip Code 93905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MARINA CLUB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A87E00375E7284C77A81
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CALAMIA, FRANK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 PADOVA DRIVE
 City SALINAS State CA Zip Code 93905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MARINA CLUB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : A81FF120B5FEE4095881
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CALAMIA, FRANK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 PADOVA DRIVE
 City SALINAS State CA Zip Code 93905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MARINA CLUB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A64CD0AC16267400D920
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CALAMIA, FRANK, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 PADOVA DRIVE
 City SALINAS State CA Zip Code 93905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MARINA CLUB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A024503EB94CC4ED2B80
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CALARCO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32785 NW BEACH RD
 City HILLSBORO State OR Zip Code 97124-8307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A42C1F20EA11944FD9DB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CALDWELL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 593 ZAHARIAS CIRCLE
 City HEMET State CA Zip Code 92545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SURVEYOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AFFD4B40FB73741BB8AB
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 170.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CALDWELL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 SALISBURY CIRCLE
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MELD FINANCIAL Occupation (for Individual) VP MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AEDDD5247E52B4DDF9EF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CALVIN, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 ESSEX GREEN
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 29 / 2021
Transaction ID : A7AF122D16E7F44808AC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CALVIN, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 ESSEX GREEN
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 20 / 2021
Transaction ID : A4B3D3C860DE142A4AB6
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CALVIN, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 ESSEX GREEN
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 04 / 29 / 2021
Transaction ID : A107D61E99FD446E78C0
 Amount of Each Receipt this Period: 50.00
 Memo Item

B. CALVIN, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 ESSEX GREEN
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 05 / 20 / 2021
Transaction ID : A0AC8D81728DE4385826
 Amount of Each Receipt this Period: 25.00
 Memo Item

C. CALVIN, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 ESSEX GREEN
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 29 / 2021
Transaction ID : AE3E66C536C644162A32
 Amount of Each Receipt this Period: 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CALVIN, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 ESSEX GREEN
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 06 / 20 / 2021
Transaction ID : AB5DC486E5BA44760898
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CALVIN, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3810 ESSEX GREEN
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A2A98A98F30BC4D128DB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CAMERER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AZUL PLACE
 City SANTA FE State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST--WRITER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 18 / 2021
Transaction ID : AFB7CA88A9C37467BA00
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 324 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMERER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AZUL PLACE
 City SANTA FE State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST--WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : AC48A75F0F4054171B71
 Amount of Each Receipt this Period 75.00
 Memo Item

B. CAMERER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AZUL PLACE
 City SANTA FE State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST--WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A1B748D2E431E49B8961
 Amount of Each Receipt this Period 75.00
 Memo Item

C. CAMERER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 AZUL PLACE
 City SANTA FE State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST--WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A9B0553567A134FA1BDC
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMERON, RANDOLPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18016 NANTZ RD
 City CORNELIUS State NC Zip Code 28031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AA2D3E042AB2749E5B82
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CAMPBELL, BEVERLY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13040 LOBLOLLY LANE SOUTH
 City JACKSONVILLE State FL Zip Code 32246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.25

Date of Receipt 05 / 28 / 2021
Transaction ID : A59AC3AF04A3E433796E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CAMPBELL, BEVERLY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13040 LOBLOLLY LANE SOUTH
 City JACKSONVILLE State FL Zip Code 32246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.25

Date of Receipt 05 / 28 / 2021
Transaction ID : AF74584C578564F40A8B
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPBELL, BEVERLY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13040 LOBLOLLY LANE SOUTH
 City JACKSONVILLE State FL Zip Code 32246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.25

Date of Receipt 06 / 16 / 2021
Transaction ID : A7A9851D45BAF4328862
 Amount of Each Receipt this Period 10.00
 Memo Item

B. CAMPBELL, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SUMMER ST
 City IPSWICH State MA Zip Code 01938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THERMO FISHER Occupation (for Individual) SR NATIONAL ACCT EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : ABFFA56D13DBF41CAA84
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CAMPISI, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1620 UNIVERSITY AVE
 City SAN JOSE State CA Zip Code 95126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A29169320EDA04C41A4E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPISI, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1620 UNIVERSITY AVE
 City SAN JOSE State CA Zip Code 95126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A77A46A491B6F47518E5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CANALES, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 EMPEROR WAY
 City DINUBA State CA Zip Code 93618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A0F8232901AB845E8BC9
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CANINO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 MYRTLE CT
 City CALABASH State NC Zip Code 28467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A921583E526A644D582B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CANINO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 MYRTLE CT
 City CALABASH State NC Zip Code 28467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : AF8D971E01D1948F2A7A
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. CANNON, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3052 SUNRISE BLVD
 City SLIDELL State LA Zip Code 70461-5679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A806BBDEDBB1945889DD
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. CANORO, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 THOMAS DRIVE
 City ENGLISHTOWN State NJ Zip Code 07726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESK TRUCKING INC Occupation (for Individual) TRUCKING BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2021
Transaction ID : A9BD753D3BECE48B595B
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CANTALUPO, CARMINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 TAURUS CIRCLE
 City RENO State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AB1A8B897F47D48ACA97
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CANTILLO, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 WORTHINGTON MILL ROAD
 City RICHBORO State PA Zip Code 18954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERIDAN HEALTHCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : ABE9F37FE8F934388A26
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CANTILLO, JOAQUIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 WORTHINGTON MILL ROAD
 City RICHBORO State PA Zip Code 18954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERIDAN HEALTHCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A253A32D97B4F4002A06
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CANTOR, IRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 BANYAN RD
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2021
Transaction ID : A4A6750A363194E1C82F
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CANTOR, IRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 BANYAN RD
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2021
Transaction ID : AACCC83E2174D646BCA39
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CANTOR, IRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 BANYAN RD
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : AC2E5C45F54B74C6B840
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 331 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CANTOR, IRIS, , ,			Date of Receipt MM / DD / YYYY 03 / 05 / 2021 Transaction ID : A6C57262CE1D643C1BA5
Mailing Address 220 BANYAN RD			Amount of Each Receipt this Period 50.00
City PALM BEACH	State FL	Zip Code 33480	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF		Occupation (for Individual) INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CANTOR, IRIS, , ,			Date of Receipt MM / DD / YYYY 04 / 04 / 2021 Transaction ID : A9FBBEAD8DF2B40BBA5C
Mailing Address 220 BANYAN RD			Amount of Each Receipt this Period 100.00
City PALM BEACH	State FL	Zip Code 33480	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF		Occupation (for Individual) INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CANTOR, IRIS, , ,			Date of Receipt MM / DD / YYYY 04 / 05 / 2021 Transaction ID : A7BF1E896C01F4824B40
Mailing Address 220 BANYAN RD			Amount of Each Receipt this Period 50.00
City PALM BEACH	State FL	Zip Code 33480	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) SELF		Occupation (for Individual) INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CANTOR, IRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 BANYAN RD
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : ABCDFE18B9E6047EB949
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CANTOR, IRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 BANYAN RD
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A261B8101800E456D8E5
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CARBONARA, MARILYN, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6080 BLACKLICK EASTERN ROAD
 City PICKERINGTON State OH Zip Code 43147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AEE6F31BFA4414B37BE3
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARDOZA MOORE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1858 WILSON PIKE

City FRANKLIN	State TN	Zip Code 37067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROCLAIMING JUSTICE TO THE NATIONS	Occupation (for Individual) PRESIDENT/PRODUCER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021

Transaction ID : AF92ECBFD8E864425A5F

Amount of Each Receipt this Period
50.00

Memo Item

B. CARDOZA MOORE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1858 WILSON PIKE

City FRANKLIN	State TN	Zip Code 37067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PROCLAIMING JUSTICE TO THE NATIONS	Occupation (for Individual) PRESIDENT/PRODUCER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021

Transaction ID : A03B74DE0A4A94C2C874

Amount of Each Receipt this Period
50.00

Memo Item

C. CAREY, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1892

City ALTURAS	State CA	Zip Code 96101
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021

Transaction ID : A2F136A77688940D8A79

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARGILE, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 MCBRIDE LN
 City CORPUS CHRISTI State TX Zip Code 78408-2339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021
Transaction ID : A58B2BB72500040CE8E4
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CARGILE, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 MCBRIDE LN
 City CORPUS CHRISTI State TX Zip Code 78408-2339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : A43E8F337C8D942D49D9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A28644CF948A2452AB69
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 335 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A41211463D5424A3A92A
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : AFFA7240E62854985A51
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : ABCA3A53E98BC489FBC2
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A891F0E6CDFB04689A0C
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A756BD07C12B840BEA52
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A81C2526AFD59461794C
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 337 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 31 / 2021**
Transaction ID : A3B0D3FF7C07B46DA9F2
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : ACB546DA929424E8C912
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CARIERI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 ATLANTIS COVE
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A8E6E8D945BEB4B41A19
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARLIN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 CORDGRASS LN
 City LELAND State NC Zip Code 28451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : AC2F38B4F838E4848A6A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARLIN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 CORDGRASS LN
 City LELAND State NC Zip Code 28451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : A48C63CD17C764FE2AFF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CARLIN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 CORDGRASS LN
 City LELAND State NC Zip Code 28451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : AA48923FFFDDA4AB9A29
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 339 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CARLIN, MARY ELLEN, , ,

Mailing Address **905 EGAN AVE**

City **PACIFIC GROVE** State **CA** Zip Code **93950**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **02 / 20 / 2021**

Transaction ID : AC133437F3DD84BC49CB

Amount of Each Receipt this Period **100.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CARLIN, MARY ELLEN, , ,

Mailing Address **905 EGAN AVE**

City **PACIFIC GROVE** State **CA** Zip Code **93950**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **03 / 14 / 2021**

Transaction ID : A94F75E77919745EB993

Amount of Each Receipt this Period **50.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CARLIN, MARY ELLEN, , ,

Mailing Address **905 EGAN AVE**

City **PACIFIC GROVE** State **CA** Zip Code **93950**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **03 / 20 / 2021**

Transaction ID : AC5B288FC03144D2BB21

Amount of Each Receipt this Period **100.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **250.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 340 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARL, LAURIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5919 BAYOU GLEN RS

City HOUSTON	State TX	Zip Code 77057
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WM CARL REALTORS, INC	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2021

Transaction ID : AD2AC53A73C4D4200AD7

Amount of Each Receipt this Period
100.00

Memo Item

B. CARL, LAURIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5919 BAYOU GLEN RS

City HOUSTON	State TX	Zip Code 77057
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WM CARL REALTORS, INC	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2021

Transaction ID : A3FB328DD06E34EA3821

Amount of Each Receipt this Period
100.00

Memo Item

C. CARL, LAURIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5919 BAYOU GLEN RS

City HOUSTON	State TX	Zip Code 77057
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WM CARL REALTORS, INC	Occupation (for Individual) REALTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2021

Transaction ID : AC2E8D51B589D4DB7A54

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARL, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5919 BAYOU GLEN RS
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WM CARL REALTORS, INC Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt **05 / 09 / 2021**
Transaction ID : AB756F3AE53C14D90A9B
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CARL, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5919 BAYOU GLEN RS
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WM CARL REALTORS, INC Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt **06 / 09 / 2021**
Transaction ID : A01080132D75E4F57B06
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CARLSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 41
 City PARON State AR Zip Code 72122-0041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERVICE-TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **02 / 28 / 2021**
Transaction ID : AF9D9F8C1BB2C4E748D5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 342 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CARLSON, DAN, , ,

Mailing Address **PO BOX 41**

City **PARON** State **AR** Zip Code **72122-0041**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SERVICE-TECH** Occupation (for Individual) **ENGINEER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2021

Transaction ID : A8DCBBA6F56D4444E821

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CARLSON, DAN, , ,

Mailing Address **PO BOX 41**

City **PARON** State **AR** Zip Code **72122-0041**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SERVICE-TECH** Occupation (for Individual) **ENGINEER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **305.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2021

Transaction ID : A34546925EAF441298B3

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CARLSON, DAN, , ,

Mailing Address **PO BOX 41**

City **PARON** State **AR** Zip Code **72122-0041**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SERVICE-TECH** Occupation (for Individual) **ENGINEER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2021

Transaction ID : AF761E3D401CD4B78AB1

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **120.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 343 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARLSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 41
 City PARON State AR Zip Code 72122-0041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERVICE-TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 04 / 30 / 2021
Transaction ID : AEC629941961742D2B48
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARLSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 41
 City PARON State AR Zip Code 72122-0041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERVICE-TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 05 / 22 / 2021
Transaction ID : A76B0FDA8E90A46F4B76
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CARLSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 41
 City PARON State AR Zip Code 72122-0041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERVICE-TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 05 / 30 / 2021
Transaction ID : AA453395CCC604A168CD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 344 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARLSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 41
 City PARON State AR Zip Code 72122-0041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERVICE-TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : ADBE6433E672A4D38BBC
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. CARLSON, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 41
 City PARON State AR Zip Code 72122-0041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERVICE-TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AA1A303C8A9DB43EAAE2
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CARLSON, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24249 CALLE ARTINO
 City MURRIETA State CA Zip Code 92562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A8A513499B09D40CF8EA
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 345 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARLSON, MARIEMAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19995 GRAYSTONE

City SAN JOSE	State CA	Zip Code 95120
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 24 / 2021
Transaction ID : AD464353B41614D36A67

Amount of Each Receipt this Period
35.00

Memo Item

B. CARLTON, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7412 ASHLAND LANE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 15 / 2021
Transaction ID : A032531D9A5AB4118A97

Amount of Each Receipt this Period
100.00

Memo Item

C. CARLTON, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7412 ASHLAND LANE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
04 / 15 / 2021
Transaction ID : A15294F6DCF77469FBF3

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 346 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARLTON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7412 ASHLAND LANE
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A1949BCD63DAC496F80E
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CARLTON, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7412 ASHLAND LANE
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A2DF793B0AB824219801
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CARLUCCI, CANIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 65 LIBERTY STREET
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) EXCAVATING CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A16A6D081B2F9451A886
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 3012
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARLUCCI, CANIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65 LIBERTY STREET

City STAMFORD	State CT	Zip Code 06902
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) EXCAVATING CONTRACTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2021

Transaction ID : A83699442FACF4036B83

Amount of Each Receipt this Period
50.00

Memo Item

B. CARNARU, SERBAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5025 65TH ST

City WOODSIDE	State NY	Zip Code 11377
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2021

Transaction ID : A5A3CDB5FED4442FAC4

Amount of Each Receipt this Period
100.00

Memo Item

C. CARNER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 CAMINO REAL

City FORT COLLINS	State CO	Zip Code 80524
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2021

Transaction ID : A9493F34EC53E4905AFA

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 348 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARNER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 CAMINO REAL
 City FORT COLLINS State CO Zip Code 80524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A07FBC509B9C44904A15
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARR, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2841 OLD MARKSVILLE HWY.
 City PINEVILLE State LA Zip Code 71360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AF97B586E2D4846F4899
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CARR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4132 ANNISTOWN RD
 City SNELLVILLE State GA Zip Code 30039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMBAT VETERANS INITIATIVE Occupation (for Individual) COMBAT VETERANS COUNSELOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A0D5CB6594B7F4D20BE3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 349 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4132 ANNISTOWN RD
 City SNELLVILLE State GA Zip Code 30039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMBAT VETERANS INITIATIVE Occupation (for Individual) COMBAT VETERANS COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AEB0C1A60D7E14A02861
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARR, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4132 ANNISTOWN RD
 City SNELLVILLE State GA Zip Code 30039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMBAT VETERANS INITIATIVE Occupation (for Individual) COMBAT VETERANS COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A071E944692234D89917
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CARTER, BOBBY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 LINKHILL COURT
 City ALEDO State TX Zip Code 76008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A5FEA55DDADF348CDB21
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 350 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, BOBBY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 LINKHILL COURT
 City ALEDO State TX Zip Code 76008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 06 / 17 / 2021
Transaction ID : A2D96B11125EE4C2EBE3
 Amount of Each Receipt this Period 10.00
 Memo Item

B. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 02 / 03 / 2021
Transaction ID : AE227735E05A842039F5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 02 / 28 / 2021
Transaction ID : AD7944F4F9AB54AB0AF2
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 351 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A3C86D5E0EE50405B8B6
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : AB18AAD69B8F44B8A8A1
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : AF4DCD70952F94B4199A
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 352 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AAE4A45EC69E14467B82
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A53ADBB088C534D789D4
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CARTER, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 23RD ST
 City PARKERSBURG State WV Zip Code 26101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AE83A7947B669460290C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 353 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 627 W POPLAR

City PARAGOULD	State AR	Zip Code 72450
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021

Transaction ID : ADAD171AABC374A0FB8

Amount of Each Receipt this Period
50.00

Memo Item

B. CARTER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 627 W POPLAR

City PARAGOULD	State AR	Zip Code 72450
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021

Transaction ID : A7257D31F553D4C27B60

Amount of Each Receipt this Period
50.00

Memo Item

C. CARTER, CECIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 165 WINDMILL RD

City KERRVILLE	State TX	Zip Code 78028
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021

Transaction ID : AFD979E0F49B74E56B3B

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, CECIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 WINDMILL RD
 City KERRVILLE State TX Zip Code 78028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : ABE5BD87B8CBA4CF19E1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARTER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3881 QUARRY MOUNTAIN ROAD
 City PARK CITY State UT Zip Code 84098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : ADF7B3BB6BBB8434C9B1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CARTER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3881 QUARRY MOUNTAIN ROAD
 City PARK CITY State UT Zip Code 84098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A4A0C5BFE39B54A1CB03
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 355 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, JERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 GARDEN CLUB DR
 City PANAMA CITY State FL Zip Code 32401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A695FDD9F573149A8AC0
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CARTER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 MILL ROAD
 City EDGECOMB State ME Zip Code 04556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : AE90A8DB274F9490FB19
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CARTER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 MILL ROAD
 City EDGECOMB State ME Zip Code 04556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AEF589B2A55394DA69FF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 356 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 HWY173
 City WILMOT State AR Zip Code 71676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPRA Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : A537C2ED87A7E450CBC4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARTER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 HWY173
 City WILMOT State AR Zip Code 71676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPRA Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 17 / 2021
Transaction ID : AF01FD5374EFF4DA6A3B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CARTER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 HWY173
 City WILMOT State AR Zip Code 71676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPRA Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AB6274EE8E9BE45ECA3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 HWY173
 City WILMOT State AR Zip Code 71676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TPRRA Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A4C8A83602CF740129ED
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CASEBEER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 SW 45TH STREET
 City LAWTON State OK Zip Code 73505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A179B9CE2F98A4BB3B70
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CASEBEER, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 SW 45TH STREET
 City LAWTON State OK Zip Code 73505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A8F41F45D959D4AB28AD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 358 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CASH, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 OLMSTED STREET
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : A5DA74ED7C42941D8998
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CASH, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 OLMSTED STREET
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A45EEB8515B3A4149985
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CASH, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 OLMSTED STREET
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : ACED3E0875DC64210BEB
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

300.00
 100.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CASH, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 OLMSTED STREET
 City BIRMINGHAM State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AF3477617935940B2B07
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CASSARETTO, KIMBERLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16925 SCHELL RD
 City OAKDALE State CA Zip Code 95361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BEHAVIORAL ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A2972917D4C0E48C183F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CASSARETTO, KIMBERLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16925 SCHELL RD
 City OAKDALE State CA Zip Code 95361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BEHAVIORAL ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A87AEA457D5F34F4AB10
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CASTRENCE, ROMULO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 533 LANNING CT
 City SAN JOSE State CA Zip Code 95133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BECTON DICKINSON Occupation (for Individual) FSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A3BDBC1C388F44F148F6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CASTRO, OSWALDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 PARK POTOMAC AVE, #604 S
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : AAD793F10D6EE4F37B7C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CASTRO, OSWALDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 PARK POTOMAC AVE, #604 S
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A55172669F7724C1DA07
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 361 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CATE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 VAQUERO RD
 City ARCADIA State CA Zip Code 91007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF MONROVIA Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021
Transaction ID : ABC64FC62F8CF4AA4B91
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. CATE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 VAQUERO RD
 City ARCADIA State CA Zip Code 91007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF MONROVIA Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : ACFA5F6ABB74F4ED1913
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. CATE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 VAQUERO RD
 City ARCADIA State CA Zip Code 91007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF MONROVIA Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : A016B3D56769A4BE0A4B
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 362 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CATE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 VAQUERO RD
 City ARCADIA State CA Zip Code 91007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF MONROVIA Occupation (for Individual) FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : ACAD7B404E2B646A280B
 Amount of Each Receipt this Period 15.00
 Memo Item

B. CATENA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16894 CROWN BRIDGE DR
 City DELRAY BEACH State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A8F51421B6C9D4BD6B2E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CATENA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16894 CROWN BRIDGE DR
 City DELRAY BEACH State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A51A821C465724BED85A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 363 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CATENA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16894 CROWN BRIDGE DR
 City DELRAY BEACH State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AA6607C8D53674A5CB6E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CAUDLE, RHONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1495 COUNTY ROAD 1201
 City MAUD State TX Zip Code 75567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOWIE COUNTY TRANSPORTATION DEPT Occupation (for Individual) SCHOOL BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A2D270D530B7F40DCAAB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CAUGHON, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 331
 City SEAHURST State WA Zip Code 98062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A136D2772D16849F5B7B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAUGHRON, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 331

City SEAHURST	State WA	Zip Code 98062
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A24AD251BABB347D99C0

Amount of Each Receipt this Period
50.00

Memo Item

B. CAULK, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1550 83RD ST NW

City GROVE	State OK	Zip Code 74344
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A1DEAF978274F4D0583A

Amount of Each Receipt this Period
35.00

Memo Item

C. CAVALLO, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4969 ODESSA AVE.

City ENCINO	State CA	Zip Code 91436
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A24707754807E44AA8E1

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 365 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAVALLO, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4969 ODESSA AVE.
 City ENCINO State CA Zip Code 91436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A05CBCEFBBE3646418A3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CAVANO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9139 N BAY BLVD
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A950AC1DA8B494D32A3C
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CAVANO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9139 N BAY BLVD
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A44148BEB50334F83A4D
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 366 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAVANO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9139 N BAY BLVD
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A2FAE52EBB4B74F4A89A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CAVARICCI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26185 OROVILLE
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CLOTHING MANUFACTURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A65E093A63A9B41ABAC9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CAVARICCI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26185 OROVILLE
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CLOTHING MANUFACTURER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A692CF987536A4B80990
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 367 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAVENDER, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 W DEHAVILLAND WAY
 City TUCSON State AZ Zip Code 85755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A5980BE0ABC9147FDBA4
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. CAVENDER, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 W DEHAVILLAND WAY
 City TUCSON State AZ Zip Code 85755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 31 / 2021
Transaction ID : ADA20C405E88F4DA39C8
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. CAVENDER, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 W DEHAVILLAND WAY
 City TUCSON State AZ Zip Code 85755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AF9BEFA54A6E7488095A
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 368 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAYOT, ANJIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3056 ARDEN PLACE
 City SAINT PAUL State MN Zip Code 55129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEYOT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A8720D52187D24B5AB18
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CAYOT, ANJIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3056 ARDEN PLACE
 City SAINT PAUL State MN Zip Code 55129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEYOT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A8B6140E9CA9340C4874
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CECHETTINI, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CRESTVIEW DRIVE
 City ORINDA State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A19D95A85B63B46A2ADF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 369 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CECHETTINI, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CRESTVIEW DRIVE
 City ORINDA State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A85F95DDF5F024698ABE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CECRLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1232 W. BRYN MAWR AVE
 City CHICAGO State IL Zip Code 60660-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : ADE8C039A73C44DA7868
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CERBONE, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 EAST HAMILTON AVE
 City MASSAPEQUA State NY Zip Code 11758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2021
Transaction ID : AE3C5DB10693D4B369E6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 371 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHARLESWORTH, LEILA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33000 COVINGTON CLUB DR APT 9
 City FARMINGTON State MI Zip Code 48334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONTESSORI SCHOOL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AE876B2D3404C4A4081D
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CHARNOCK, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 6
 City WAVERLY State TN Zip Code 37185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 11 / 2021
Transaction ID : A68A380E35233497A9DE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHARNOCK, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 6
 City WAVERLY State TN Zip Code 37185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A60A526AEE1754ADC802
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 115.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 372 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHARPENTIER, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5210 CHARPENTIER RD.
 City NEW IBERIA State LA Zip Code 70560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HAIRSTYLIST/SHOP OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AA308BC26F3584C9EA0A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CHASE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 WOODY CIRCLE
 City MELBOURNE BEACH State FL Zip Code 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AC34C9FE8B728449CA58
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CHASTAIN, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 LAKE ESTATE DRIVE
 City CHAPIN State SC Zip Code 29036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE FIRE SAFETY INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 30 / 2021
Transaction ID : AE7EC49DD321F42F8941
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 373 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHASTAIN, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 LAKE ESTATE DRIVE
 City CHAPIN State SC Zip Code 29036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE FIRE SAFETY INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : AC3F9ACBCB0294250B93
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CHASTAIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 FAIRLINGTON DRIVE
 City LAKELAND State FL Zip Code 33813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 29 / 2021**
Transaction ID : ADEC1051F008F408DB3C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHASTAIN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 828 FAIRLINGTON DRIVE
 City LAKELAND State FL Zip Code 33813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 29 / 2021**
Transaction ID : A22EB8EADE4D842B5854
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 374 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHEATHAM, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1609 TUPELO DR
 City WAYCROSS State GA Zip Code 31501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEACON PEDIATRICS Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A73595C1CEA0C47E7BC5
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CHEATUM, DAVID, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 8TH AVE
 City CANYON State TX Zip Code 79015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 20 / 2021
Transaction ID : AC6AEACB7248B4A47B43
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CHEATUM, DAVID, M, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 8TH AVE
 City CANYON State TX Zip Code 79015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A61665FAB62224529994
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 375 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHEEK, DAVID, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 13048
 City LAS CRUCES State NM Zip Code 88013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A61BB37C03AFB41DCA78
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CHEEK, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14744 20TH AVE NE
 City SHORELINE State WA Zip Code 98155-7328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A533B2DC209CC432E9FA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHEEK, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14744 20TH AVE NE
 City SHORELINE State WA Zip Code 98155-7328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A36DE70F115014806956
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

135.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHERRY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 FAIRVIEW BLVD
 City FAIRVIEW State TN Zip Code 37062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEICHERT REALTORS - BIG DOG GROUP Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : AAECD109092D24ED5BD
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CHERRY, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 FAIRVIEW BLVD
 City FAIRVIEW State TN Zip Code 37062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEICHERT REALTORS - BIG DOG GROUP Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A78D55348AE9642C6ACA
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CHERWENKA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19650 PUTNEYS CT
 City BROOKFIELD State WI Zip Code 53045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2021
Transaction ID : A3A5B6C69AB9C44D9911
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHERWENKA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19650 PUTNEYS CT
 City BROOKFIELD State WI Zip Code 53045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 09 / 2021**
Transaction ID : A5A38DA19FF634560852
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CHERWENKA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19650 PUTNEYS CT
 City BROOKFIELD State WI Zip Code 53045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 09 / 2021**
Transaction ID : AE81F728131A44C67A0D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CHERWENKA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19650 PUTNEYS CT
 City BROOKFIELD State WI Zip Code 53045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 09 / 2021**
Transaction ID : A995F2F8772E149D8B37
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 378 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHILDERS, KEITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 917

City SUMITON	State AL	Zip Code 35148
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DOGOODERS TREE SERVICE		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021
Transaction ID : AE152FED3D40545038EF

Amount of Each Receipt this Period
 100.00

Memo Item

B. CHILDERS, KEITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 917

City SUMITON	State AL	Zip Code 35148
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DOGOODERS TREE SERVICE		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : ABF16C2C940F147318F8

Amount of Each Receipt this Period
 100.00

Memo Item

C. CHILDERS, KEITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 917

City SUMITON	State AL	Zip Code 35148
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DOGOODERS TREE SERVICE		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 450.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A8148236FB4BB42A58C8

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 379 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHILDERS, KEITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 917

City SUMITON	State AL	Zip Code 35148
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DOGOODERS TREE SERVICE		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : AFA2BED1A1BE1405F84B

Amount of Each Receipt this Period
 50.00

Memo Item

B. CHILDERS, KEITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 917

City SUMITON	State AL	Zip Code 35148
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DOGOODERS TREE SERVICE		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021
Transaction ID : A3A943A1F50224138945

Amount of Each Receipt this Period
 25.00

Memo Item

C. CHILDERS, KEITH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 917

City SUMITON	State AL	Zip Code 35148
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DOGOODERS TREE SERVICE		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 625.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A4C0254F0C15543FFB63

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 380 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 CHILDERS, KEITH, A., ,

Mailing Address P. O. BOX 917

City SUMITON State AL Zip Code 35148

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOGOODERS TREE SERVICE Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **06 / 08 / 2021**

Transaction ID : ACDF8148476D046F1849

Amount of Each Receipt this Period **25.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 CHILDERS, KEITH, A., ,

Mailing Address P. O. BOX 917

City SUMITON State AL Zip Code 35148

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOGOODERS TREE SERVICE Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt **06 / 11 / 2021**

Transaction ID : A4EE8C1AFE35640E697E

Amount of Each Receipt this Period **10.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 CHILDERS, KEITH, A., ,

Mailing Address P. O. BOX 917

City SUMITON State AL Zip Code 35148

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOGOODERS TREE SERVICE Occupation (for Individual) OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt **06 / 16 / 2021**

Transaction ID : A4987B9EDE77848B691A

Amount of Each Receipt this Period **100.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.00

135.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 381 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHOI, RUBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4877
 City FOSTER CITY State CA Zip Code 94404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 17 / 2021
Transaction ID : AFC574EEB70D247A18E7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CHRISTEN, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2624 MOSSVINE DRIVE
 City CARROLLTON State TX Zip Code 75007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA AIRLINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 30 / 2021
Transaction ID : A377516D3C96B4F8FB0A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHRISTEN, KARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2624 MOSSVINE DRIVE
 City CARROLLTON State TX Zip Code 75007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELTA AIRLINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : A90F78171EBF94BD69C5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 382 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHRISTENSEN, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 E 2ND ST
 City SUPERIOR State NE Zip Code 68978
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HASTINGS TRIBUNE Occupation (for Individual) FREE - LANCE WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.75

Date of Receipt 05 / 19 / 2021
Transaction ID : AB2CABF79EBA3408692C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CHRISTENSEN, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 E 2ND ST
 City SUPERIOR State NE Zip Code 68978
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HASTINGS TRIBUNE Occupation (for Individual) FREE - LANCE WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 258.75

Date of Receipt 05 / 25 / 2021
Transaction ID : A1E235EB0FE8C42DE8D7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CHRISTENSEN, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 945 E 2ND ST
 City SUPERIOR State NE Zip Code 68978
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE HASTINGS TRIBUNE Occupation (for Individual) FREE - LANCE WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.75

Date of Receipt 06 / 25 / 2021
Transaction ID : A81C510329183408D881
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHRISTENSEN, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 4TH STREET SW
 City MADELIA State MN Zip Code 56062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) SECURITY FORCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AD0CE0EACF2684764A09
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CHRISTENSEN, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 4TH STREET SW
 City MADELIA State MN Zip Code 56062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) SECURITY FORCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A4C42DE7D63DD44B2983
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 03 / 2021
Transaction ID : AE4EA844034894FCCA2B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 03 / 2021
Transaction ID : A45F06D1835E44EAEBD8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A1475BED36C5E4FDF976
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A78E38908327E413E8A4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 385 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AFB90F00765AB4EF3B89
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A7EA79672DF3F4FABBAE
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A9AA16F3263864A78BA6
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 386 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHRISTOPHER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3587 BOSTON ST
 City DENVER State CO Zip Code 80238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A9124FE0B20E24E46B85
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CHUA, SIMON, TY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7077 9TH ST.
 City BUENA PARK State CA Zip Code 90621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGS Occupation (for Individual) SECURITY OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AD6FD2C42B9CD4D21B28
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CHURCHILL, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 GRASSMARKET
 City SAN ANTONIO State TX Zip Code 78259-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2021
Transaction ID : AD98F53BF54BC456DB2C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 387 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHURCHILL, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 GRASSMARKET
 City SAN ANTONIO State TX Zip Code 78259-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : A00534CE33A954646BE0
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CHURCHILL, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 GRASSMARKET
 City SAN ANTONIO State TX Zip Code 78259-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A0C4885929A784F48BB4
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CHURCHILL, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 GRASSMARKET
 City SAN ANTONIO State TX Zip Code 78259-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A741AFCEB9E40B46B6B0B
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 388 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHURCHILL, DALLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 GRASSMARKET
 City SAN ANTONIO State TX Zip Code 78259-2322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A795EA1D701FB47E1A9D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CIEPLAK, MARY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3672 CHARFIELD LANE
 City FAIRFIELD TOWNSHIP State OH Zip Code 45011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : AED2291A9CF3E47B6809
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CIEPLAK, MARY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3672 CHARFIELD LANE
 City FAIRFIELD TOWNSHIP State OH Zip Code 45011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A4572CBAB7CA44A07870
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 389 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLARK, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 966
 City STARKVILLE State MS Zip Code 39760-0966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.C. CLARK, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021
Transaction ID : A12BD7192E2224D0EA9F
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CLARK, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 966
 City STARKVILLE State MS Zip Code 39760-0966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.C. CLARK, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : A91B4E2D2C64E431FBCB
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. CLARK, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 966
 City STARKVILLE State MS Zip Code 39760-0966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.C. CLARK, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A27ADFCB777F14910AFD
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 390 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLARK, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 966
 City STARKVILLE State MS Zip Code 39760-0966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.C. CLARK, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 16 / 2021
Transaction ID : ACBCF6FD86F69444E820
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CLARK, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 966
 City STARKVILLE State MS Zip Code 39760-0966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.C. CLARK, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A271C87A8A29643AEB72
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CLARK, ANGELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 822
 City DILLINGHAM State AK Zip Code 99576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 29 / 2021
Transaction ID : AE380EB02BC6B41189A6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 300.00
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 391 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLARKE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 E. CARNIFEX FERRY
 City FREDERICKSBURG State VA Zip Code 22407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : A4EDF2CFC85CB4387B64
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CLARKE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 E. CARNIFEX FERRY
 City FREDERICKSBURG State VA Zip Code 22407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : A716793A87E0244E1974
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CLARKE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 E. CARNIFEX FERRY
 City FREDERICKSBURG State VA Zip Code 22407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A8847A131C19148E48B7
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 392 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLARKE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5809 E. CARNIFEX FERRY
 City FREDERICKSBURG State VA Zip Code 22407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : A8A2D11A1C6DA412EBF7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CLARK, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 SCRIPPS DR 130
 City SACRAMENTO State CA Zip Code 95825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MEDICAL DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : A40BE0B92785842E8885
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CLATTERBUCK, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2221 E 1850 N RD
 City WATSEKA State IL Zip Code 60970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : ADF10991EE2A6428E8C4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 393 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLAYTON, BRIAN, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 152
 City WEST FORKS State ME Zip Code 04985
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : AC667C44307A1456CAFC
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CLAYTON, BRIAN, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 152
 City WEST FORKS State ME Zip Code 04985
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AB2AF463014FF48EE969
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CLEARY, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10003 MEADOW LAKE LANE
 City HOUSTON State TX Zip Code 77042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : AB74B0F5872D84A95ACD
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 394 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLEARY, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10003 MEADOW LAKE LANE

City HOUSTON	State TX	Zip Code 77042
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A11019F2B704048D381B

Amount of Each Receipt this Period
 15.00

Memo Item

B. CLEARY, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10003 MEADOW LAKE LANE

City HOUSTON	State TX	Zip Code 77042
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A2F355151A4A3460CBED

Amount of Each Receipt this Period
 10.00

Memo Item

C. CLEMENCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 EASTFORD ROAD

City SOUTHBRIDGE	State MA	Zip Code 01550
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HYDE GROUP INC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021
Transaction ID : A2B3151557BE24372A04

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 395 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLEMENCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 EASTFORD ROAD
 City SOUTHBRIDGE State MA Zip Code 01550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYDE GROUP INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : AD6588FB535E44ED3957
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CLEMENCE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 EASTFORD ROAD
 City SOUTHBRIDGE State MA Zip Code 01550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HYDE GROUP INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 18 / 2021**
Transaction ID : A6ADE624A35EB49D982F
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CLEVENGER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 HILLSBORO CT
 City MIDLAND State TX Zip Code 79705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBIZ Occupation (for Individual) COMMERCIAL INSURANCE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : A2C14603654EF42BDA82
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 396 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLEVENGER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 HILLSBORO CT
 City MIDLAND State TX Zip Code 79705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBIZ Occupation (for Individual) COMMERCIAL INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AD872BC874CC546F99E9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CLIFFORD, LILIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8908 GOLD LEAF WAY
 City SACRAMENTO State CA Zip Code 95826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AD950E2D63AA64B18B10
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CLINE, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13800 LC 1155
 City MOUNT VERNON State MO Zip Code 65712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAN CLINE TRANSPORT, INC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A3CCEB54A4C9940CCA09
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 397 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLOUD, DAVID, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29138 LAUREL VALLEY DRIVE
 City VISTA State CA Zip Code 92084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 25 / 2021
Transaction ID : A28B0DC508F484138883
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CLOUD, DAVID, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29138 LAUREL VALLEY DRIVE
 City VISTA State CA Zip Code 92084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A47584ED49EE6464DA29
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CLOUD, DAVID, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29138 LAUREL VALLEY DRIVE
 City VISTA State CA Zip Code 92084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A2AAC670FF770492D8A6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 398 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COBAIN, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 860 WEST OLD OLYMPIC HIGHWAY
 City SHELTON State WA Zip Code 98584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : ABC015812B10B4529830
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COBURN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 CROSS RD
 City MANCHESTER State NH Zip Code 03109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CC FLOORING Occupation (for Individual) WOOD FLOORS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A9FE45CCA38194F31BAF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COBURN, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 CROSS RD
 City MANCHESTER State NH Zip Code 03109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CC FLOORING Occupation (for Individual) WOOD FLOORS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A0094C7F0EA8945578AE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 399 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COFFEY, DAVID, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 WASHINGTON STREET
 City FOXBOROUGH State MA Zip Code 02035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A2FF7BB5E4B8142CAB49
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COFFEY, LAURENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10348 LAKE SHEEN RESERVE BLVD
 City ORLANDO State FL Zip Code 32836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A4DD4573152554B44938
 Amount of Each Receipt this Period 35.00
 Memo Item

C. COFFMAN, LESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 N. GATEHOUSE DR. J
 City METAIRIE State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREATER LAKESIDE CORP. Occupation (for Individual) SECURITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A41D5F37AAEAD4927897
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 400 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COHEN, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3760 RICE BLVD
 City HOUSTON State TX Zip Code 77005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : ADECCE823DB304857AFB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. COHEN, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3760 RICE BLVD
 City HOUSTON State TX Zip Code 77005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A241FAAF6C8284F80AA0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COLEMAN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34522 N SCOTTSDALE RD 220-437
 City SCOTTSDALE State AZ Zip Code 85266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2021
Transaction ID : AFCAA34489BC64C678F9
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 401 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLEMAN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34522 N SCOTTSDALE RD
 220-437
 City SCOTTSDALE State AZ Zip Code 85266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2021
Transaction ID : AD1BF7C9EACCD4B4EBF
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. COLEMAN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 VRITTANY
 City CANYON LAKE State TX Zip Code 78133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2021
Transaction ID : ACA53192DF1564009924
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. COLEMAN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 VRITTANY
 City CANYON LAKE State TX Zip Code 78133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AE4A67CE6F2CD4A31994
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 402 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLEMAN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 VRITTANY
 City CANYON LAKE State TX Zip Code 78133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A17D096FBEC9B4AD7883
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. COLEMAN, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 VRITTANY
 City CANYON LAKE State TX Zip Code 78133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AE256D949D387491A93D
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. COLEMAN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 BRIARCLIFF ROAD
 City DOTHAN State AL Zip Code 36303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SAFETY MOVERS, INC. Occupation (for Individual) JACK OF ALL TRADES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : AAC26AFBF043C45FB91D
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 403 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COLEMAN, PATRICK, , ,

Mailing Address **2811 BRIARCLIFF ROAD**

City DOTHAN	State AL	Zip Code 36303
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN SAFETY MOVERS, INC.	Occupation (for Individual) JACK OF ALL TRADES
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : AA9F82F269BC1410DB36

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COLE, MAUREEN, , ,

Mailing Address **604 OLSON ST**

City RIDGWAY	State PA	Zip Code 15853
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2021

Transaction ID : A7E95D4FD990E4ACC844

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COLE, MAUREEN, , ,

Mailing Address **604 OLSON ST**

City RIDGWAY	State PA	Zip Code 15853
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2021

Transaction ID : AF72C9E593CD34673BB6

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 404 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLE, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 OLSON ST
 City RIDGWAY State PA Zip Code 15853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021
Transaction ID : A23757A679FF648DF94B
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. COLE, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 OLSON ST
 City RIDGWAY State PA Zip Code 15853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : AE88EC33FA0C6416782E
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. COLES, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 PINE TERRACE DRIVE
 City KELSEYVILLE State CA Zip Code 95451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A6ECB523EFD39491D9D0
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 405 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLES, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 PINE TERRACE DRIVE
 City KELSEYVILLE State CA Zip Code 95451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.50

Date of Receipt 05 / 04 / 2021
Transaction ID : AA51AD934002D4AE6A73
 Amount of Each Receipt this Period 2.50
 Memo Item

B. COLES, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3432 PINE TERRACE DRIVE
 City KELSEYVILLE State CA Zip Code 95451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.50

Date of Receipt 05 / 04 / 2021
Transaction ID : ACD9F6B0D4C5D47BB8B7
 Amount of Each Receipt this Period 10.00
 Memo Item

C. COLE, WILLIAM, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2117 EAST PALMA CIRCLE
 City WEST PALM BEACH State FL Zip Code 33415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A8E54DC2F444D4A0BAE4
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	27.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 406 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLLINS, GREGORY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 144
 City HOMER State AK Zip Code 99603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNOW AND DIRT REMOVER Occupation (for Individual) PRESIDENT OF CONTRACTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A4575843480B44A64B65
 Amount of Each Receipt this Period 100.00
 Memo Item

B. COLLINS, GREGORY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 144
 City HOMER State AK Zip Code 99603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNOW AND DIRT REMOVER Occupation (for Individual) PRESIDENT OF CONTRACTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 21 / 2021
Transaction ID : A7C66843F8130487AAC3
 Amount of Each Receipt this Period 100.00
 Memo Item

C. COLLINS, GREGORY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 144
 City HOMER State AK Zip Code 99603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNOW AND DIRT REMOVER Occupation (for Individual) PRESIDENT OF CONTRACTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A90893E2C74EA406AAD6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 407 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLLINS, GREGORY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 144
 City HOMER State AK Zip Code 99603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNOW AND DIRT REMOVER Occupation (for Individual) PRESIDENT OF CONTRACTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A996840608E69446783D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. COLLINS, GREGORY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 144
 City HOMER State AK Zip Code 99603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SNOW AND DIRT REMOVER Occupation (for Individual) PRESIDENT OF CONTRACTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AAFD74210DD0B472FB1A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. COLLINS, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10309 NIBLIC DR
 City SAINT LOUIS State MO Zip Code 63114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GM Occupation (for Individual) FACTORY WORK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A1BF6A5A98DC84B249B3
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 408 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLLOTTI, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WASHINGTON TERR
 City AUDUBON State NJ Zip Code 08106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A92157A1396B74ECFB64
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 13 / 2021
Transaction ID : A3D7C3347224342F2B66
 Amount of Each Receipt this Period 250.00
 Memo Item

C. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 15 / 2021
Transaction ID : AA3694FCA6F764EE4B3B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 385.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 409 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A4843F757DF804A7190C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2021
Transaction ID : A12B6E06F9AE94D9DB5C
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2021
Transaction ID : A0B53C8508673474E913
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 410 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AAC9B09392BEA4577A95
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A8081BFD94369417CAAD
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. COMBEST, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11413 MEADOW
 City LEAWOOD State KS Zip Code 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : AEC2B7C7CDC564293ADE
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 411 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COMBS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 ALLISONA ROAD
 City CHATTANOOGA State TN Zip Code 37060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCA Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2021
Transaction ID : AEB315F2EC9674578809
 Amount of Each Receipt this Period 50.00
 Memo Item

B. COMBS, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 ALLISONA ROAD
 City CHATTANOOGA State TN Zip Code 37060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCA Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A45317DEA4D234C978BF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 21 / 2021
Transaction ID : AA485CA7C5FFB4593B4B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 412 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : AEE5E86B5CA6144DF973
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2021
Transaction ID : A22BF11FC7B024DA3AD4
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : A35BA1D2F6E9B42AD875
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 413 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 21 / 2021
Transaction ID : AB2917CC2E2AC43D0A47
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A220A6DC696914FE79C6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 06 / 20 / 2021
Transaction ID : AA71196D638E54B6D871
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 414 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COMPTON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address RR 72. BOX 363
 City NORWOOD State MO Zip Code 65717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AD3AB7D5458854CC888F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CONCEPCION, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 GARDENIA DR
 City SALINAS State CA Zip Code 93906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A589D7EAAEA13482E89F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CONCEPCION, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 GARDENIA DR
 City SALINAS State CA Zip Code 93906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A0E29106EAD8C4396BE0
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 415 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CONENNA, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8839 HUNT CANYON RD
 City CORONA State CA Zip Code 92883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A9D636535E86048B881C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CONIGLIO, HERMINIA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29169 DERBY DR
 City MURRIETA State CA Zip Code 92563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A4F6807B1BC1D43EF966
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CONIGLIO, HERMINIA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29169 DERBY DR
 City MURRIETA State CA Zip Code 92563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AA9AACFAB92B4425BABE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 416 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CONIGLIO, HERMINIA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29169 DERBY DR
 City MURRIETA State CA Zip Code 92563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A7D79042550154C30B42
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CONNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 E BUCHTEL AVE
 City AKRON State OH Zip Code 44305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A4FA5EFFFB089348468FD
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CONNER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 E BUCHTEL AVE
 City AKRON State OH Zip Code 44305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A1104A39BB7C54A66B84
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 417 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CONNORS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 BETTY GARRETT DR
 City MADISON State AL Zip Code 35758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CDL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : AEE57110C11BF4491822
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. CONNORS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 BETTY GARRETT DR
 City MADISON State AL Zip Code 35758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CDL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A61DFF6279B134E00BE5
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. CONNORS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 BETTY GARRETT DR
 City MADISON State AL Zip Code 35758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CDL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AB20F5979BD99429F86E
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 418 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CONNORS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 BETTY GARRETT DR
 City MADISON State AL Zip Code 35758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CDL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A8A0B360D84964CB58C0
 Amount of Each Receipt this Period 10.00
 Memo Item

B. CONNORS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 BETTY GARRETT DR
 City MADISON State AL Zip Code 35758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CDL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A12D5931108004B4C96B
 Amount of Each Receipt this Period 10.00
 Memo Item

C. CONNORS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 BETTY GARRETT DR
 City MADISON State AL Zip Code 35758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CDL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AF6AE5E4EA75F4EF3BE3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 419 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CONOVER, KEVIN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 95 E PALISADE RD

City STERLING	State UT	Zip Code 84665
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2021

Transaction ID : A0E16FA34DD2647998E6

Amount of Each Receipt this Period
225.00

Memo Item

B. CONTE, JULIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9858 PARK CREST LANE

City SAN DIEGO	State CA	Zip Code 92124
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KAISER PERMANENTE	Occupation (for Individual) REGISTERED NURSE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : ABF7C0E52CA734A09B8E

Amount of Each Receipt this Period
35.00

Memo Item

C. CONTRERAS, ROBERTO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6418 HARBOR MIST

City MISSOURI CITY	State TX	Zip Code 77459
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REPSA LLC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : AC25A86D47C2C4D5E92F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 420 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CONTRERAS, ROBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6418 HARBOR MIST
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REPESA LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : ABE1A33255A144741B03
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CONTRERAS, SHERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8655 CALLE MIRADOR
 City EL CAJON State CA Zip Code 92021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A08E5F25D09E947F2825
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COOKE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8795 COUNTY ROAD 418
 City HANNIBAL State MO Zip Code 63401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVERSIDE DERMATOTLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A50276F16C43745D3906
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 421 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOKE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8795 COUNTY ROAD 418
 City HANNIBAL State MO Zip Code 63401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RIVERSIDE DERMATOTLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A47061B429DDD43FB9C4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. COOK, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19151 CR450A
 City UMATILLA State FL Zip Code 32784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A03FC5BCDB1DD46EFA0E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COOK, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19151 CR450A
 City UMATILLA State FL Zip Code 32784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A21F4BC4CFBF14DAA94E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 422 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOK, LORETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3521 FRANKLIN RD HEFLIN LA
 City HEFLIN State LA Zip Code 71039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GSS CONSTRUCTION & OILFIELD SUPPLY Occupation (for Individual) PURCHASING AGENT FOR OILFIELD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A5909F37524FE4DCBA06
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COOK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 342 N. MAIN ST. SUITE 100
 City ALPHARETTA State GA Zip Code 30009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) FINANCIAL ADVISOR AND CERTIFIE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 02 / 2021
Transaction ID : AB22BB1FE34F241358B8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. COOK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 342 N. MAIN ST. SUITE 100
 City ALPHARETTA State GA Zip Code 30009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) FINANCIAL ADVISOR AND CERTIFIE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 18 / 2021
Transaction ID : A86B3FDE014CE4BE2A7D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 423 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 342 N. MAIN ST. SUITE 100

City ALPHARETTA	State GA	Zip Code 30009
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES	Occupation (for Individual) FINANCIAL ADVISOR AND CERTIFIED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021

Transaction ID : A50F2473167234CBE8F4

Amount of Each Receipt this Period
35.00

Memo Item

B. COOK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 342 N. MAIN ST. SUITE 100

City ALPHARETTA	State GA	Zip Code 30009
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EDWARD JONES	Occupation (for Individual) FINANCIAL ADVISOR AND CERTIFIED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021

Transaction ID : AF042239F81A14EB392D

Amount of Each Receipt this Period
50.00

Memo Item

C. COOLEY, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3205 CALIFORNIA AVENUE

City DICKINSON	State TX	Zip Code 77539
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021

Transaction ID : A99DFC899B26D47FCB6F

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 424 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOLIDGE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 168TH ST SW
 City BOTHELL State WA Zip Code 98012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A4C9B86B15B974F2FA8C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COOMBES, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7031 BEACH DR. S W
 City SEATTLE State WA Zip Code 98136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 04 / 2021
Transaction ID : A347D39BC1A5947D4873
 Amount of Each Receipt this Period 250.00
 Memo Item

C. COOMBES, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7031 BEACH DR. S W
 City SEATTLE State WA Zip Code 98136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 04 / 2021
Transaction ID : A299CAC6A6C4448C2BEA
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 425 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOMBES, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7031 BEACH DR. S W
 City SEATTLE State WA Zip Code 98136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : A996C75B7398E42FA94F
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. COOMBES, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7031 BEACH DR. S W
 City SEATTLE State WA Zip Code 98136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2021
Transaction ID : ABD92F2BF89774731B1D
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. COOMBES, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7031 BEACH DR. S W
 City SEATTLE State WA Zip Code 98136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A23D2CC9BD1BA48FCA08
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 426 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COONEY, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1672 HARDWICK RD
 City TOWSON State MD Zip Code 21286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDATALNTIC DENTAL TRANSITIONS Occupation (for Individual) BUSINESS OWNER / BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : AD0C9D079AD5643ADAAE
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. COONEY, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1672 HARDWICK RD
 City TOWSON State MD Zip Code 21286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDATALNTIC DENTAL TRANSITIONS Occupation (for Individual) BUSINESS OWNER / BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : A4CF013D2E0664F42BA5
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. COOPER, CANDIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58179 HWY 20
 City ROCKPORT State WA Zip Code 98283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUFFALO RUN RESTAURANT Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : ABBE4493CFF4144D6B36
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 427 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOPER, CANDIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58179 HWY 20
 City ROCKPORT State WA Zip Code 98283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUFFALO RUN RESTAURANT Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A6944AB98467149A4BAE
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. COOPER, CHERYL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10628 SE 44TH ST
 City OKLAHOMA CITY State OK Zip Code 73150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN LEGION Occupation (for Individual) VETERANS SERVICE OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A28B424FA9E5B4FC8A35
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. COOPER, CHERYL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10628 SE 44TH ST
 City OKLAHOMA CITY State OK Zip Code 73150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN LEGION Occupation (for Individual) VETERANS SERVICE OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A41313F6F196D4894BE5
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 428 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOPER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10628 SE 44TH ST
 City OKLAHOMA CITY State OK Zip Code 73150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN LEGION Occupation (for Individual) VETERANS SERVICE OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A0922E0FCBFBE4409BFB
 Amount of Each Receipt this Period 150.00
 Memo Item

B. COOPER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 DIGGER STREET
 City HOWELL State NJ Zip Code 07731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.50

Date of Receipt 04 / 26 / 2021
Transaction ID : AD5F6341F7651412DAD2
 Amount of Each Receipt this Period 2.50
 Memo Item

C. COOPER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 DIGGER STREET
 City HOWELL State NJ Zip Code 07731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 212.50

Date of Receipt 04 / 27 / 2021
Transaction ID : AB1F3CAE35B7E42DA8CB
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	162.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 429 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOPER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 DIGGER STREET
 City HOWELL State NJ Zip Code 07731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A4D96E4E1B66447F7B3F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. COOPER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 DIGGER STREET
 City HOWELL State NJ Zip Code 07731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A7C5BAFA1DE0846E9BB3
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. COOPER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 DIGGER STREET
 City HOWELL State NJ Zip Code 07731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 322.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A4783ED765BE74D69BE6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 430 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOPER, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 DIGGER STREET
 City HOWELL State NJ Zip Code 07731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.50

Date of Receipt 06 / 26 / 2021
Transaction ID : A437D1AB3C1B04B95A27
 Amount of Each Receipt this Period 10.00
 Memo Item

B. COOP, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1506 NORTH TENNESSEE BLVD
 City MURFREESBORO State TN Zip Code 37130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AA2E2287601054004B76
 Amount of Each Receipt this Period 35.00
 Memo Item

C. COPENHAVER, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4625 AUBURN BLVD
 City SACRAMENTO State CA Zip Code 95841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A8B2AB08E7C274B398E6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 431 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COPENHAVER, MICHAEL, , ,

Mailing Address 4625 AUBURN BLVD

City SACRAMENTO State CA Zip Code 95841

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021

Transaction ID : A219F187517E74C9DA4E

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COPE, RUSSELL, J, ,

Mailing Address 406 TAYLOR ROAD

City CROSSVILLE State TN Zip Code 38572-3575

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021

Transaction ID : AE6DA87EF9AA44FC9AF9

Amount of Each Receipt this Period
 45.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COPE, RUSSELL, J, ,

Mailing Address 406 TAYLOR ROAD

City CROSSVILLE State TN Zip Code 38572-3575

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021

Transaction ID : A3B31202F85B940A6AC5

Amount of Each Receipt this Period
 45.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 432 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COFIL, CORNEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4739 N KEDVALE AVE
 City CHICAGO State IL Zip Code 60630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A054BF37147F6434EB69
 Amount of Each Receipt this Period 100.00
 Memo Item

B. COPP, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6120 CAPE COD LANE
 City YORBA LINDA State CA Zip Code 92887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALMART Occupation (for Individual) SALES ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A63C92C0B760F4B6AA03
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CORBIN, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5750 WOODVINE COURT
 City FORT WORTH State TX Zip Code 76140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : AD6D86FED31CB4CB5A69
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CORKERN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 N GAMWYN PARK DRIVE
 City GREENVILLE State MS Zip Code 38701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DRMC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A775C635905E3409487E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CORREIA, CARLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 SYCAMORE LANE
 City WESTPORT State MA Zip Code 02790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A1736923895C6492CAAE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CORREIA, CARLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 SYCAMORE LANE
 City WESTPORT State MA Zip Code 02790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AAA93C8B19FAE45AF9D3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 434 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COTTON, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 BLUEBONNET LANE
 City RED OAK State TX Zip Code 75154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A5A0C4B080D884A04A00
 Amount of Each Receipt this Period 50.00
 Memo Item

B. COURTIS, SPERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 OAK SHADE RD
 City GAITHERSBURG State MD Zip Code 20878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AA8DA5156AFC742FDB0B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. COURTIS, SPERO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 OAK SHADE RD
 City GAITHERSBURG State MD Zip Code 20878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A9E6759AC04D04BD4A1F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 435 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COURTRIGHT, AUDREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 CLIPPER COVE
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A40D97BC44A0F422AAF0
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COVER, WINSTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 MEDICI
 City SAN ANTONIO State TX Zip Code 78258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A97D49AE92F4A4F15AB3
 Amount of Each Receipt this Period 35.00
 Memo Item

C. COVINGTON, BERT, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 57
 City GUTHRIE State KY Zip Code 42234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A4622B37AF99D495F851
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 436 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COVINGTON, BERT, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 57

City GUTHRIE	State KY	Zip Code 42234
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A949C5DCF25A24FEFA09

Amount of Each Receipt this Period
 50.00

Memo Item

B. COVINGTON, RALPH E, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 MATTEONI DR

City SPARKS	State NV	Zip Code 89434
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : AB46C96F9FA764E93B3E

Amount of Each Receipt this Period
 50.00

Memo Item

C. COVINGTON, RALPH E, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1719 MATTEONI DR

City SPARKS	State NV	Zip Code 89434
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : AA0ADBF1220B74714B72

Amount of Each Receipt this Period
 5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 437 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COVINGTON, RALPH E, , SR

Mailing Address 1719 MATTEONI DR

City SPARKS State NV Zip Code 89434

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
05 / 12 / 2021
Transaction ID : A518BFBFA91C94544B2E

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COVINGTON, RALPH E, , SR

Mailing Address 1719 MATTEONI DR

City SPARKS State NV Zip Code 89434

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
06 / 05 / 2021
Transaction ID : A5D28C7DB7CC84910857

Amount of Each Receipt this Period
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. COVINGTON, RALPH E, , SR

Mailing Address 1719 MATTEONI DR

City SPARKS State NV Zip Code 89434

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt
06 / 12 / 2021
Transaction ID : AB32298731EAD47FEAC0

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 438 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COX, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P0 BOX 95

City LENORAH	State TX	Zip Code 79749
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A4C4FE571EA004C63903

Amount of Each Receipt this Period
50.00

Memo Item

B. COX, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P0 BOX 95

City LENORAH	State TX	Zip Code 79749
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2021

Transaction ID : A72652668761E455DAD5

Amount of Each Receipt this Period
50.00

Memo Item

C. COX, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P0 BOX 95

City LENORAH	State TX	Zip Code 79749
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : A2169327A480D4E83B25

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 439 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COYNE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX403
 City MCKENNA State WA Zip Code 98558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A57110431B2C8472CA0D
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. CRAIGMILE, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 WINTER GREEN ST. NW
 City ALEXANDRIA State MN Zip Code 56308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : AE5DB8F8D678142CD887
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. CRATTY, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1470 EMPIRE AVE
 City LINCOLN PARK State MI Zip Code 48146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : AB06F708F5560446783B
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 440 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CRAWFORD, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12935 US HWY 285
 City CONFORD State CO Zip Code 80433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 11 / 2021**
Transaction ID : A08FBAB5F1DB14337B78
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CRAWFORD, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12935 US HWY 285
 City CONFORD State CO Zip Code 80433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 11 / 2021**
Transaction ID : A39F7116D6DAA41078B0
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CRAWFORD, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12935 US HWY 285
 City CONFORD State CO Zip Code 80433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 11 / 2021**
Transaction ID : ABB443598B84F4F3FA81
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 441 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CRAWFORD, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12935 US HWY 285

City CONFORD	State CO	Zip Code 80433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : AA694D2833A5A4F0A842

Amount of Each Receipt this Period
100.00

Memo Item

B. CRAWFORD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WILKSHIRE CRT

City GRAND BLAC	State MI	Zip Code 48349
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A4672D5B876AE4609981

Amount of Each Receipt this Period
50.00

Memo Item

C. CRAWFORD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 WILKSHIRE CRT

City GRAND BLAC	State MI	Zip Code 48349
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A7AF5D6B0FB484EFF945

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 442 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CRAWFORD, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3805 IVY LANE

City ATLANTA	State GA	Zip Code 30342
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RODAN AND FIELDS	Occupation (for Individual) SKINCARE SALES
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : AC085D4569F5F4C27A77

Amount of Each Receipt this Period
50.00

Memo Item

B. CRAWFORD, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3805 IVY LANE

City ATLANTA	State GA	Zip Code 30342
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RODAN AND FIELDS	Occupation (for Individual) SKINCARE SALES
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : AF1F94917C26F406995B

Amount of Each Receipt this Period
50.00

Memo Item

C. CRAW, KENNETH, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 MATTHEW DRIVE

City O FALLON	State IL	Zip Code 62269
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A06A43D44007C49D9A30

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 443 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.20

Date of Receipt **02 / 13 / 2021**
Transaction ID : A833A4ABFC2794F6D8D3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.20

Date of Receipt **02 / 15 / 2021**
Transaction ID : A4683A0BAE7F84CC8A15
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.20

Date of Receipt **02 / 16 / 2021**
Transaction ID : AA1AC90FBFA3B4421BB2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 444 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.40

Date of Receipt **02 / 18 / 2021**
Transaction ID : A55A3B4B9250F42E3A6A
 Amount of Each Receipt this Period 20.20
 Memo Item

B. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.40

Date of Receipt **03 / 13 / 2021**
Transaction ID : A79FD6948A808425CAA7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.40

Date of Receipt **03 / 15 / 2021**
Transaction ID : A4A33BBC1AC2F400A8BF
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 445 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.40

Date of Receipt **03 / 16 / 2021**
Transaction ID : A7BAACDE590524838AD2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.60

Date of Receipt **03 / 18 / 2021**
Transaction ID : AA1CAB4F621824187A92
 Amount of Each Receipt this Period 20.20
 Memo Item

C. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.60

Date of Receipt **04 / 13 / 2021**
Transaction ID : A5F9F74C258954904AB1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 446 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2021
Transaction ID : A285D182ABA534D5386D
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : A75C6063F4BAB4348BA9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : A0F81D5759D944BA5A74
 Amount of Each Receipt this Period
 20.20
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 447 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : AC290C95B3E6F4673A18
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A86E35F27F8494831853
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A68E5DA99B755462781A
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 448 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A06E458B0743646A7BBA
 Amount of Each Receipt this Period 20.20
 Memo Item

B. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AA5B9E4BB5D3F4DFDA99
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CREITZ, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 MILLPOND RD
 City SUNBURY State OH Zip Code 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 861.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A8C9C6C2575EA4973904
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.20
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CREITZ, THOMAS, , ,

Mailing Address 218 MILLPOND RD

City SUNBURY State OH Zip Code 43074

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
911.00

Date of Receipt
06 / 16 / 2021
Transaction ID : A99B066B52836452593A

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CREITZ, THOMAS, , ,

Mailing Address 218 MILLPOND RD

City SUNBURY State OH Zip Code 43074

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
931.20

Date of Receipt
06 / 18 / 2021
Transaction ID : AD4FB2F5553554CDB82F

Amount of Each Receipt this Period
20.20

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CREWES-JONES, JAN, , ,

Mailing Address 2 E. BELLEVIEW PLACE

City ENGLEWOOD State CO Zip Code 80113

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 17 / 2021
Transaction ID : AD4E9C05C2EA145729F1

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.20

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 450 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREWES-JONES, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 E. BELLEVIEW PLACE
 City ENGLEWOOD State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : ABF0C9237D8764FFFA0A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CREWS, EDNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2087 CREWS LANE
 City CRYSTAL SPRINGS State MS Zip Code 39059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A432CB69E837746E8A85
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CREWS, EDNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2087 CREWS LANE
 City CRYSTAL SPRINGS State MS Zip Code 39059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A58770842EFE743AD83C
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 451 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CREWS, EDNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2087 CREWS LANE
 City CRYSTAL SPRINGS State MS Zip Code 39059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AA54D61A4ED29414CA62
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CREWS, EDNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2087 CREWS LANE
 City CRYSTAL SPRINGS State MS Zip Code 39059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AF99B36B5475C4F5C855
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CRITIDES, SOPHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 76TH STREET
 City NORTH BERGEN State NJ Zip Code 07047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTA Occupation (for Individual) SALES MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AEAE48568D6494A0792A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 452 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CROCKETT, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6945 N. VISTA PL
 City TUCSON State AZ Zip Code 85704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : AA0467F8FEE154D54B97
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CROCKETT, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6945 N. VISTA PL
 City TUCSON State AZ Zip Code 85704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : AA7428CE79B6E465CA73
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. CROCKETT, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6945 N. VISTA PL
 City TUCSON State AZ Zip Code 85704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A848872047C1B4D55BE6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 453 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CROCKETT, PATRICIA, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10326 RAINIER AVENUE S
 City SEATTLE State WA Zip Code 98178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A61EE725009694B69B7D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CROSBY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 APPLE GARDEN RD
 City MOUND State MN Zip Code 55364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A90D607852E604953B5A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CROSBY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1868 CEDAR ROAD
 City PASADENA State MD Zip Code 21122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A6EF409A38C2E4BC49B5
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 454 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CROSBY, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16741 VILLAGE LN
 City DALLAS State TX Zip Code 75248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYNN-CROSBY MANAGEMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A158E0D4551BE491D87D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CROSBY, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16741 VILLAGE LN
 City DALLAS State TX Zip Code 75248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYNN-CROSBY MANAGEMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 20 / 2021
Transaction ID : ABA75D75D804F42019D3
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CROSS, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX1003
 City JACKSONVILLE State OR Zip Code 97530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AD31534FFFD594F2D953
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 455 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CROWLEY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 WILTON DR
 City ALLENDALE State NJ Zip Code 07401-1325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A4E99F97D586F4CC4854
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. CROWLEY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 WILTON DR
 City ALLENDALE State NJ Zip Code 07401-1325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A0F3C4B22FBD54ED583F
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. CROWLEY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 WILTON DR
 City ALLENDALE State NJ Zip Code 07401-1325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AEC1CA08358944869A25
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 456 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CROWLEY, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 WILTON DR
 City ALLENDALE State NJ Zip Code 07401-1325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A4C6A5C1F1AB3433B9E0
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CRUSEL, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 W BEACH BLVD
 City PASS CHRISTIAN State MS Zip Code 39571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A09ED0645A59249E5912
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CRUSEL, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 W BEACH BLVD
 City PASS CHRISTIAN State MS Zip Code 39571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 13 / 2021
Transaction ID : AD8C2D1A8639F481FAA9
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 457 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CRUSEL, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 W BEACH BLVD
 City PASS CHRISTIAN State MS Zip Code 39571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : AA840142149B04E9896C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CRUSEL, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 W BEACH BLVD
 City PASS CHRISTIAN State MS Zip Code 39571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : AA13B5A87907347F8A92
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CRUSEL, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 W BEACH BLVD
 City PASS CHRISTIAN State MS Zip Code 39571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **05 / 24 / 2021**
Transaction ID : A87694839B9134EA9BC1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 458 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CRUSEL, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 W BEACH BLVD
 City PASS CHRISTIAN State MS Zip Code 39571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : A66C464EC25A74E38B3B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CRUSEL, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 W BEACH BLVD
 City PASS CHRISTIAN State MS Zip Code 39571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **06 / 24 / 2021**
Transaction ID : A3A676BAF59DD42CA815
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CUBRIA FERRARA, AMELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14611 BALGOWAN RD
 1 103
 City HIALEAH State FL Zip Code 33016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : AD30984EE534C45E4B73
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 459 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUBRIA FERRARA, AMELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14611 BALGOWAN RD
 1 103
 City HIALEAH State FL Zip Code 33016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A097A2DD0DB934D28B2A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CUMMINS, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 SHENANDOAH DR
 City BEDFORD State TX Zip Code 76021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AFBA55A21FBFF418AB7A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CUMMINS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 NORTH LINCOLN ST
 City SPRING HILL State KS Zip Code 66083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : ABB165EE1310E4EF8B49
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 460 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUMMINS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 650 NORTH LINCOLN ST

City SPRING HILL	State KS	Zip Code 66083
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2021

Transaction ID : A67EBDCCD3A974152967

Amount of Each Receipt this Period
100.00

Memo Item

B. CUMMINS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 650 NORTH LINCOLN ST

City SPRING HILL	State KS	Zip Code 66083
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2021

Transaction ID : AFC6518717109424B917

Amount of Each Receipt this Period
100.00

Memo Item

C. CUMMINS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 650 NORTH LINCOLN ST

City SPRING HILL	State KS	Zip Code 66083
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : AC7D224F269144FE4ABF

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 461 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUNDIEFF, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 MERRIBROOK

City FRIENDSWOOD	State TX	Zip Code 77546
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOTAL SITE INC	Occupation (for Individual) CONSTRUCTION SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021

Transaction ID : A36D01BB333A04EC3A06

Amount of Each Receipt this Period
50.00

Memo Item

B. CUNDIEFF, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 MERRIBROOK

City FRIENDSWOOD	State TX	Zip Code 77546
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOTAL SITE INC	Occupation (for Individual) CONSTRUCTION SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021

Transaction ID : A4F48A327E0C54AA98AD

Amount of Each Receipt this Period
50.00

Memo Item

C. CUNNINGHAM, LENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 220

City CALVERT	State AL	Zip Code 36513
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021

Transaction ID : AB98A16F88D504400811

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 462 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUNNINGHAM, LENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 220

City CALVERT	State AL	Zip Code 36513
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 04 / 17 / 2021
Transaction ID : A599DD23D08274D93AC6

Amount of Each Receipt this Period
 50.00

Memo Item

B. CUNNINGHAM, LENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 220

City CALVERT	State AL	Zip Code 36513
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 05 / 17 / 2021
Transaction ID : ADB0CC2053E9F4755BA7

Amount of Each Receipt this Period
 50.00

Memo Item

C. CUNNINGHAM, LENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 220

City CALVERT	State AL	Zip Code 36513
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 06 / 17 / 2021
Transaction ID : AE3713032DFFC43FAA27

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 463 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUPPLES, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A1DD28D34EF8B4214AA7
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. CUPPLES, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : AF849E1E6E7E14730A46
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. CUPPLES, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021
Transaction ID : A2B0306ADC4294FC780C
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 464 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUPPLES, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : ABCBF3FD7A7AB4BC3BB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CUPPLES, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A2940C84B16694D01ABF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CUPPLES, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : A86E9D92E09414161ACE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 465 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUPPLES, LYND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 05 / 2021
Transaction ID : AF26FD2849373456EB78
 Amount of Each Receipt this Period 5.00
 Memo Item

B. CUPPLES, LYND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A5D2B546D2C514FAB84F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CUPPLES, LYND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A9AFD28F834284091A5E
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 466 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUPPLES, LYNDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12726 HARTS ISLAND ROAD
 City SHREVEPORT State LA Zip Code 71115-9439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A38B58019D1524007852
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CURRAN, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 PARR BLVD
 City RICHMOND State CA Zip Code 94801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AE9DCD5AEC43642F6AC9
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CURRAN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7209 HANOVER ST.
 City HANOVER PARK State IL Zip Code 60133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 01 / 2021
Transaction ID : ABAD49E59122D4F8D9BA
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 467 OF 3012 (check only one)												
	<table style="width:100%; text-align: center;"> <tr> <td><input checked="" type="checkbox"/> 11a</td> <td><input type="checkbox"/> 11b</td> <td><input type="checkbox"/> 11c</td> <td><input type="checkbox"/> 12</td> </tr> <tr> <td><input type="checkbox"/> 13</td> <td><input type="checkbox"/> 14</td> <td><input type="checkbox"/> 15</td> <td><input type="checkbox"/> 16</td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> 17</td> </tr> </table>	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16				<input type="checkbox"/> 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12										
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16										
			<input type="checkbox"/> 17										

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CURRAN, LINDA, , ,

Mailing Address **7209 HANOVER ST.**

City HANOVER PARK	State IL	Zip Code 60133
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
04 / 01 / 2021

Transaction ID : A27095F38291B466D81A

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CURRAN, LINDA, , ,

Mailing Address **7209 HANOVER ST.**

City HANOVER PARK	State IL	Zip Code 60133
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 01 / 2021

Transaction ID : AFCC133BCE5594C55B1B

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CURRAN, LINDA, , ,

Mailing Address **7209 HANOVER ST.**

City HANOVER PARK	State IL	Zip Code 60133
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 01 / 2021

Transaction ID : A8801FA7398F246D09ED

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 468 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CURRYLEONARD, CONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1624 RIBONWOOD DR
 City SODDY DAISY State TN Zip Code 37379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A47112AE5C40F41318A6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CURTIS, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 CORDELIA DRIVE
 City RUCKERSVILLE State VA Zip Code 22968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE RIDGE COFFEE CRAFTERS Occupation (for Individual) COFFEE ROASTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 24 / 2021
Transaction ID : ADCA08E8842344470ADB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. CURTIS, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1154 FREEBOARD BLVD.
 City SAEGERTOWN State PA Zip Code 16433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A3C53498B93CE411DA63
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 469 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CUSTER, FRANCES, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 EBENSBURG RD
 City JOHNSTOWN State PA Zip Code 15101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AE79CE0CC0AD249118FC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CZYZ, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 76 WEST GENESEE ST.
 City BALDWINVILLE State NY Zip Code 13027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WORD OF LIFE ASSEMBLY OF GOD Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A0C3C151EDFCB4271801
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DACHENHAUSEN, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2128 2650 AVE
 City CHAPMAN State KS Zip Code 67431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT PLAINS TRUCKING Occupation (for Individual) TRUCKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A9E3A78DB5BF841E69C2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 470 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAHLING, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1964 N LAKEMAN DR
 City BELLBROOK State OH Zip Code 45305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A14BF19F2173D4338A3F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DAHLKE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 107TH PL N
 City MAPLE GROVE State MN Zip Code 55369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A074144EFB47B467EAD1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DAHLKE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 107TH PL N
 City MAPLE GROVE State MN Zip Code 55369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A98D542B223DB43A3807
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 471 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAHLKE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 107TH PL N
 City MAPLE GROVE State MN Zip Code 55369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 06 / 01 / 2021
Transaction ID : AA95E7461A9144ECDB70
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DALTON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42369 WHITNEY RD.
 City LAGRANGE State OH Zip Code 44050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 23 / 2021
Transaction ID : A1E404F513DE648DBAD
 Amount of Each Receipt this Period 35.00
 Memo Item

C. D'AMICO, ANGELO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12736 BAY PLANTATION DRIVE
 City JACKSONVILLE State FL Zip Code 32223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 26 / 2021
Transaction ID : A1E4E3031C5B4401AA5B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 472 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. D'AMICO, ANGELO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12736 BAY PLANTATION DRIVE
 City JACKSONVILLE State FL Zip Code 32223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : AED40E2E3BC2646E8903
 Amount of Each Receipt this Period 10.00
 Memo Item

B. D'AMICO, ANGELO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12736 BAY PLANTATION DRIVE
 City JACKSONVILLE State FL Zip Code 32223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A9FCC370D4E4544EFA6C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DANDREA, HELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78 ARMSTRONG AVE
 City STATEN ISLAND State NY Zip Code 10308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A2FAA11C820C14C5D8FF
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 473 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DANDRINOS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10055 NW 19 STREET
 City MIAMI State FL Zip Code 33172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY WIRING INC Occupation (for Individual) MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A318703048D8D48BDBFE
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DANDRINOS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10055 NW 19 STREET
 City MIAMI State FL Zip Code 33172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY WIRING INC Occupation (for Individual) MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 18 / 2021
Transaction ID : A4CCF6070AFBC4B16BAE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DANDRINOS, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10055 NW 19 STREET
 City MIAMI State FL Zip Code 33172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY WIRING INC Occupation (for Individual) MGR.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 04 / 02 / 2021
Transaction ID : AD142C752F5CA47C2AAE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 474 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DANDRINOS, DENNIS, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10055 NW 19 STREET

City MIAMI	State FL	Zip Code 33172
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUALITY WIRING INC	Occupation (for Individual) MGR.
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021

Transaction ID : A3C336D1583DD4C9FB69

Amount of Each Receipt this Period
50.00

Memo Item

B. DANIELS LUTZKE, DENISE, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 361 SWEET SHOP LN

City CLE ELUM	State WA	Zip Code 98922
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) CEO AND MENTAL HEALTH PROFES
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 13 / 2021

Transaction ID : A521D1D7849A24A6B850

Amount of Each Receipt this Period
250.00

Memo Item

C. DARBY, CAROL, ELAINE, ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 293 FREEMEN STREET

City TALLAPOOSA	State GA	Zip Code 30176
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021

Transaction ID : A5EBE590E9A994EDDB63

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	335.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 475 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : AB0F223E216EA4335A80
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **03 / 25 / 2021**
Transaction ID : AAF4FD1CFA9244E6FB2E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : ACD7B915E4DAB46859EE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 476 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 04 / 05 / 2021
Transaction ID : AA9D00D1AB5A0435CAD5
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 04 / 25 / 2021
Transaction ID : AAD81BB3F452C4AA98F4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A4582F04A7F664597931
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 477 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A6E8454FA745D47CEBAB
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A35409DDDF51C4D1C8FB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A9D9ADF9D1524411092C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

95.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 478 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AEA47E87549C44317ADC
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DARBY, CAROL, ELAINE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 293 FREEMEN STREET
 City TALLAPOOSA State GA Zip Code 30176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A7899D435A7024BEB81D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DAVIS, BARBI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 OVERLOOK DRIVE
 City NEWPORT COAST State CA Zip Code 92657-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 04 / 2021
Transaction ID : A1829F2E130EB4F18B58
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 479 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, BRADFORD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 E 7TH ST
 City DELTA State CO Zip Code 81416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLOTHING STORE OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A85D2A5704E1B4DA3961
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. DAVIS, BRADFORD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 E 7TH ST
 City DELTA State CO Zip Code 81416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLOTHING STORE OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A458AEF4179174EFA848
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. DAVIS, BRADFORD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 E 7TH ST
 City DELTA State CO Zip Code 81416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CLOTHING STORE OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AAE135C4998644A24A98
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 480 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, DARYL, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 SW 160TH ST
 City OKLAHOMA CITY State OK Zip Code 73170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AD0B066F9522646F1A2E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DAVIS, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3824 MEMPHIS LANE
 City FORT WORTH State TX Zip Code 76133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AB767B7387B084D2AAD4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DAVIS, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14624 BARNEY DRIVE
 City CHARLOTTE State NC Zip Code 28227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AEC5AA725574441799F4
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 481 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14624 BARNEY DRIVE
 City CHARLOTTE State NC Zip Code 28227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : AD968C3B53A544A7C88F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **02 / 05 / 2021**
Transaction ID : ADA07CF6D5E644781B5E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **02 / 05 / 2021**
Transaction ID : AACDB246330444E83B0E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 482 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2727 MILLER LANDING ROAD

City TALLAHASSEE	State FL	Zip Code 32312
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

Transaction ID : A612416E00EC3418A9B6

Amount of Each Receipt this Period
35.00

Memo Item

B. DAVIS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2727 MILLER LANDING ROAD

City TALLAHASSEE	State FL	Zip Code 32312
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2021

Transaction ID : AC53AC040C72C4291BAD

Amount of Each Receipt this Period
50.00

Memo Item

C. DAVIS, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2727 MILLER LANDING ROAD

City TALLAHASSEE	State FL	Zip Code 32312
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2021

Transaction ID : ACC3894B79EBC4E77B67

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 483 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : A9D772A52196F428EB60
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : A86D03663E35E478EAA0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : AD308270A3A6640D09E4
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 484 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A211F43D893E8499381F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : A42F53506B88348D181A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : A736F6B760AE747F1B64
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 485 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2727 MILLER LANDING ROAD
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A99A177A1D69B476FA53
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DAVIS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 OVERTON CITCLE
 City FRENCH CAMP State MS Zip Code 39745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIEMENS ENERGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 17 / 2021**
Transaction ID : A744EE26DCD5E4BE6B6C
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DAVIS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 OVERTON CITCLE
 City FRENCH CAMP State MS Zip Code 39745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIEMENS ENERGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **03 / 03 / 2021**
Transaction ID : AECCD9452EDC14AB8BD1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 486 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 OVERTON CITCLE
 City FRENCH CAMP State MS Zip Code 39745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIEMENS ENERGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A62C8CFF6414748529BB
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DAVIS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 OVERTON CITCLE
 City FRENCH CAMP State MS Zip Code 39745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIEMENS ENERGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A199CB1D426DC46508EC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DAVIS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 OVERTON CITCLE
 City FRENCH CAMP State MS Zip Code 39745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIEMENS ENERGY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 17 / 2021
Transaction ID : AC1C3727D06984F259EC
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 487 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 OVERTON CITCLE

City FRENCH CAMP	State MS	Zip Code 39745
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIEMENS ENERGY	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : A66C9B9C691BB40B28AA

Amount of Each Receipt this Period
100.00

Memo Item

B. DAVISON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4897 HIGHWAY 97 EAST

City GONZALES	State TX	Zip Code 78629
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2021

Transaction ID : A705EB09E086345FDAE7

Amount of Each Receipt this Period
35.00

Memo Item

C. DAWSON, STEVE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11871 DUNLAY AVE

City BATON ROUGE	State LA	Zip Code 70809
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ISOMAG, CORP.	Occupation (for Individual) FOUNDER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2021

Transaction ID : AF940E58C5BC445D5A17

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 488 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAWSON, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11871 DUNLAY AVE
 City BATON ROUGE State LA Zip Code 70809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISOMAG, CORP. Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A6A5608F2C20F47C09FC
 Amount of Each Receipt this Period 250.00
 Memo Item

B. DAY, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 HAWKSTONE WAY
 City PITTSFORD State NY Zip Code 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2021
Transaction ID : AA6A241F0006340E8A0F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DAY, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 HAWKSTONE WAY
 City PITTSFORD State NY Zip Code 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A16220DD0E93342FE9A8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 489 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAY, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 HAWKSTONE WAY
 City PITTSFORD State NY Zip Code 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A455CD0F625544C1999A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DE WET, PIETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 BUFFALO TRAIL
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A2F76C1C9E6CE4BEF928
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DE WET, PIETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 BUFFALO TRAIL
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A011B1BB40E4B4A3A8CA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 490 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DE YOUNG, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21005 GEORGE HUNT CIR.
 1110
 City WAUKESHA State WI Zip Code 53186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MJDY GLOBAL ENTERPRISES LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : A1DE5F928C0274DBD9A3
 Amount of Each Receipt this Period 10.00
 Memo Item

B. DEANGELO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 FIELD LANE
 City VILLANOVA State PA Zip Code 19085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 19 / 2021**
Transaction ID : A8C9FBB78F477460BB23
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DEBES, THELMA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19355 BRISS RIDGE STREZZ UNIT 103
 City LEGBURG State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **06 / 29 / 2021**
Transaction ID : AACFFCF3B346842C9AE7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 491 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEEMTER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6609 CENTER INDUSTRIAL DR.
 City JENISON State MI Zip Code 49428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021
Transaction ID : ABDA4B9475FE742569CB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DEGIDIO, NICK M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12007 GEORGETTE AVE
 City LA MIRADA State CA Zip Code 90638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A827E1E06384F4C65A05
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DEGRADO, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13153 SAGE COURT
 City HOMER GLEN State IL Zip Code 60491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2021
Transaction ID : A71E30A80F6CD489BBDD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 492 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEGRADO, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13153 SAGE COURT
 City HOMER GLEN State IL Zip Code 60491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : AD7771C89B0D144DAA3C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. DEJARNETT, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 718 E 8TH. ST.
 City HOUSTON State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENVIROCON SYSTEMS Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AFF20BF17D75347AB8B5
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. DEL RIO, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 TAHITI BEACH ISLAND RD
 City MIAMI State FL Zip Code 33143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A76E35B863278488F899
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 493 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEL RIO, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 TAHITI BEACH ISLAND RD
 City MIAMI State FL Zip Code 33143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AF98CB21D99BB4F2BA1D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DELANEY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 LAVENDER RD
 City FOLKSTON State GA Zip Code 31537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A232CA5A6E50A44D1924
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DELLENBACK, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 8610
 City JACKSON State WY Zip Code 83002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2021
Transaction ID : ABA814A742ACE4F8AB7E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 494 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DELLENBACK, GERALDINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 8610
 City JACKSON State WY Zip Code 83002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A7370CB233BFB438EAAC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DEMING, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 627 STONY FORT RD
 City SAUNDERSTOWN State RI Zip Code 02874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 27 / 2021
Transaction ID : ADEA870E7CBE74EDDB31
 Amount of Each Receipt this Period 200.00
 Memo Item

C. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2021
Transaction ID : AF72F2DA82D234904AE8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 495 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : ADC826489C7F94AFAB13
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : ADEB7CE725C854A63820
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : A86B0DD97319C4E96890
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 496 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AF3E48AF3E3CA4E04A72
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A155A53CE340B4E4BB7A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AA9716447FDD2411E894
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 497 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
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		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEMPSTER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 MORGAN RD
 City SHOSHONI State WY Zip Code 82649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AE8F74D9A94F64D05852
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. DEMSKE, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 COUNTRYSIDE DR UNIT 1
 City BARDSTOWN State KY Zip Code 40004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KMG Occupation (for Individual) TOOLING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AD386AD9563E9406391E
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. DENNIG, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 BYRON DR.
 City SOUTH BEND State IN Zip Code 46614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : A8466E3799FE84A1EB9D
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 498 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DENNIG, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 BYRON DR.
 City SOUTH BEND State IN Zip Code 46614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A3C6F6732D0A343CE908
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DENNIS, NIICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 CASA BAY PLACE
 City SAINT AUGUSTINE State FL Zip Code 32080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) DIRECTOR OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A8194A7BDD4064867BBA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DEREZOTES, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28035 BONANZA RD
 City BARSTOW State CA Zip Code 92311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AC27814FD47A247C391E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 499 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEROSE, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 FLEMING COURT
 City LONG VALLEY State NJ Zip Code 07853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. LUKE PARISH, LONG VALLEY, NJ Occupation (for Individual) CHOIR DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : AF5603FD89CD24486A38
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DESMOND, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2773 N HAVEN DR
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00

Date of Receipt **03 / 23 / 2021**
Transaction ID : A9A9921C59AE54F3CB9A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DESMOND, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2773 N HAVEN DR
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : AB16B3A71EA33443E8F7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 500 OF 3012
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: PAGE 500 OF 3012
(check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DESMOND, BECKY, , ,
Mailing Address 2773 N HAVEN DR
City EAGLE State ID Zip Code 83616
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 305.00

Date of Receipt
04 / 23 / 2021
Transaction ID : A17D66C6AE65943A9914
Amount of Each Receipt this Period
35.00
Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DESMOND, BECKY, , ,
Mailing Address 2773 N HAVEN DR
City EAGLE State ID Zip Code 83616
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 340.00

Date of Receipt
05 / 02 / 2021
Transaction ID : A691F62AAB50E469D813
Amount of Each Receipt this Period
35.00
Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DESMOND, BECKY, , ,
Mailing Address 2773 N HAVEN DR
City EAGLE State ID Zip Code 83616
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 375.00

Date of Receipt
05 / 23 / 2021
Transaction ID : AE84C5B481A544793ACA
Amount of Each Receipt this Period
35.00
Memo Item

SUBTOTAL of Receipts This Page (optional)..... 105.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 501 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DESMOND, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2773 N HAVEN DR
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A51394F8E5917429787A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DESMOND, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2773 N HAVEN DR
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A58A05CEBA5DF480193F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRACE
 City MARIETTA State GA Zip Code 30066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIGMA THERMAL INC Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A347B030CD6574FE1BC4
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 502 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRACE
 City MARIETTA State GA Zip Code 30066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIGMA THERMAL INC Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A4EE8AD85E989431C9AD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DETORRES, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 CREEKSIDE TRL
 City SARASOTA State FL Zip Code 34243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIRES PLUS Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AAB25F7446990478BB27
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DETWILER, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12238 IVY LEAGUE CT.
 City WOODBRIDGE State VA Zip Code 22192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2021
Transaction ID : A35804C9BFE0C45CF9E3
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 503 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEVER, DARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27419 ROBILLARD SPRINGS

City KATY	State TX	Zip Code 77494
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BERKSHIRE HATHAWAY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : A85ED1CA2ADEA4D4A87C

Amount of Each Receipt this Period
100.00

Memo Item

B. DEVER, DARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27419 ROBILLARD SPRINGS

City KATY	State TX	Zip Code 77494
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BERKSHIRE HATHAWAY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2021
Transaction ID : A933F340308FD4A87ABB

Amount of Each Receipt this Period
100.00

Memo Item

C. DEVER, DARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27419 ROBILLARD SPRINGS

City KATY	State TX	Zip Code 77494
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BERKSHIRE HATHAWAY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A68EC19DAEC5C4F5E81E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 504 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEVER, DARLA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27419 ROBILLARD SPRINGS

City KATY	State TX	Zip Code 77494
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BERKSHIRE HATHAWAY	Occupation (for Individual) REALTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2021

Transaction ID : A0C60796857514AD0BED

Amount of Each Receipt this Period
100.00

Memo Item

B. DEVINE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1727 WASHINGTON LN

City DAVENPORT	State IA	Zip Code 52804
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2021

Transaction ID : A5F368BC00011467EB38

Amount of Each Receipt this Period
50.00

Memo Item

C. DEVINO, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 GREENBRIAR CIR

City CROSS JUNCTION	State VA	Zip Code 22625
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2021

Transaction ID : A3E8EDDD8CAC7451E96A

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 505 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. DEVORE, STEVE, , ,

Mailing Address 1627 N. MTN OAKS DR.

City OREM	State UT	Zip Code 84097
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYBERVISION	Occupation (for Individual) NEURO SCIENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2021

Transaction ID : AA4382E35560943CCBBB

Amount of Each Receipt this Period
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEVORE, STEVE, , ,

Mailing Address 1627 N. MTN OAKS DR.

City OREM	State UT	Zip Code 84097
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYBERVISION	Occupation (for Individual) NEURO SCIENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A49CB5E2DFA7C4C69B8B

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DEVORE, STEVE, , ,

Mailing Address 1627 N. MTN OAKS DR.

City OREM	State UT	Zip Code 84097
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SYBERVISION	Occupation (for Individual) NEURO SCIENTIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2021

Transaction ID : A9817C3876CD14BF6883

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 506 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEVORE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1627 N. MTN OAKS DR.
 City OREM State UT Zip Code 84097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYBERVISION Occupation (for Individual) NEURO SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A4EB92A7E10F24E92B9D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. DEVORE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1627 N. MTN OAKS DR.
 City OREM State UT Zip Code 84097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYBERVISION Occupation (for Individual) NEURO SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A43BA887456654A84B21
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. DEVORE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1627 N. MTN OAKS DR.
 City OREM State UT Zip Code 84097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYBERVISION Occupation (for Individual) NEURO SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A64C1533D4B0E4E60BD0
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 507 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEVORE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1627 N. MTN OAKS DR.
 City OREM State UT Zip Code 84097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYBERVISION Occupation (for Individual) NEURO SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **06 / 23 / 2021**
Transaction ID : A3BEC76648CE34212BD3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DEVOS, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 776 E 30TH ST S
 City WELLINGTON State KS Zip Code 67152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENT R. BASSFORD, CPA, INC. Occupation (for Individual) PART-TIME OFFICE CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **04 / 04 / 2021**
Transaction ID : A0AC61F4479CD45D8BE7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DEVOS, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 776 E 30TH ST S
 City WELLINGTON State KS Zip Code 67152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KENT R. BASSFORD, CPA, INC. Occupation (for Individual) PART-TIME OFFICE CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : AC53A19BE1EA5468BA83
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 508 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEWALL, MELODIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 MUD CREEK RD
 City OREGON State IL Zip Code 61061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A73C21DC42F1240C8AB6
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. DEWALL, MELODIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 MUD CREEK RD
 City OREGON State IL Zip Code 61061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A6BF20D352717443E9B6
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. DEWEESE, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13830 EAST 133RD DRIVE
 City BRIGHTON State CO Zip Code 80601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YOUR CASTLE REAL ESTATE Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : AF672DE11EDAD41D8ABE
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 509 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DI JULIA, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 PATRICIA LANE
 City CLIFTON HEIGHTS State PA Zip Code 19018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A956E0EF9D65F42B2916
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DI MEGLIO, VINCENZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 WILDWOOD CIRCLE
 City HOLTSVILLE State NY Zip Code 11742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A2C1DBBF873F5415486E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DI MEGLIO, VINCENZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 WILDWOOD CIRCLE
 City HOLTSVILLE State NY Zip Code 11742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A2D24964169084987B81
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 510 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIALS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5488 SADDLE RIDGE COURT
 City LAS CRUCES State NM Zip Code 88011-2566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAJARITO SCIENTIFIC CORP. Occupation (for Individual) BUSINESS EXEC.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A28F9EA83922448E08F3
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DIALS, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2845 DESERT ARROYO LANE
 City BULLHEAD CITY State AZ Zip Code 86429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAESARS Occupation (for Individual) ADMIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A0A69670240A84E3D9E5
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DIAMANDIS, ALEXANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2419 HICKORY AVE
 City BURLINGTON State NC Zip Code 27215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2021
Transaction ID : AF909B6C0361448C0B31
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 511 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIAS, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 S KILPATRICK AVE
 City CHICAGO State IL Zip Code 60632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ACE0067ADC66241789A0
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DIAZ-OLIVER, REMEDIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GROVE ISLE DRIVE 1701
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 27 / 2021
Transaction ID : A6FAF72FA55A34AAA8D4
 Amount of Each Receipt this Period 500.00
 Memo Item

C. DIAZ-OLIVER, REMEDIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GROVE ISLE DRIVE 1701
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 27 / 2021
Transaction ID : A5DA1967A2CFE40B596E
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1035.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 512 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIAZ-OLIVER, REMEDIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GROVE ISLE DRIVE
 1701
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : AFF0B5628AF96413BB50
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. DIAZ-OLIVER, REMEDIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GROVE ISLE DRIVE
 1701
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : AA4DF82A2C33E4321AB5
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. DIAZ-OLIVER, REMEDIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 GROVE ISLE DRIVE
 1701
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A93FF0BB5682D4111BF3
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 513 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIAZ-OLIVER, REMEDIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 GROVE ISLE DRIVE
1701

City MIAMI State FL Zip Code 33133

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021

Transaction ID : A0EAF064335144535A1D

Amount of Each Receipt this Period
500.00

Memo Item

B. DICKERSON, ALVAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1959 CHRISTOPHER WAY

City FAYETTEVILLE State NC Zip Code 28303

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021

Transaction ID : A8B23DEF053624E2695B

Amount of Each Receipt this Period
35.00

Memo Item

C. DICKERSON, HAZEL, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 CAYUGA RD

City LAKE ORION State MI Zip Code 48362

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021

Transaction ID : A3ABC794F581F4275B73

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 514 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DICKERSON, HAZEL, A, ,

Mailing Address 80 CAYUGA RD

City LAKE ORION	State MI	Zip Code 48362
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2021

Transaction ID : A0F77FC09FAB34CAF884

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DICKERSON, HAZEL, A, ,

Mailing Address 80 CAYUGA RD

City LAKE ORION	State MI	Zip Code 48362
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2021

Transaction ID : A4B47652E5EAD4BA59F8

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DICKERSON, HAZEL, A, ,

Mailing Address 80 CAYUGA RD

City LAKE ORION	State MI	Zip Code 48362
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2021

Transaction ID : A4AB359FB2B9A416BB33

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 515 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DICKERT, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 HUNTINGTON CT.
 City BURR RIDGE State IL Zip Code 60527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A28439E99D862493782D
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. DICKEY, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2940B
 City CAMDEN State AR Zip Code 71701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A3F087F8BAB5D4D3B8E6
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. DICKEY, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2940B
 City CAMDEN State AR Zip Code 71701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A9B299820A0AC4CB5944
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 516 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DICKEY, WILLIAM, E., ,

Mailing Address PO BOX 2940B

City CAMDEN	State AR	Zip Code 71701
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021

Transaction ID : AA68E26AFA3584D64AD0

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DICKEY, WILLIAM, E., ,

Mailing Address PO BOX 2940B

City CAMDEN	State AR	Zip Code 71701
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021

Transaction ID : A894ACD5F10F640948A3

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DICKMAN, PAUL, , ,

Mailing Address 3369 CANTERBURY COURT

City COVINGTON	State KY	Zip Code 41011
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) ATTORNEY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021

Transaction ID : A0963AB5BA9FE489F8C3

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 517 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DICKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 CANTERBURY COURT
 City ERLANGER State KY Zip Code 41018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A0A0DC713A33C41D29AF
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. DICKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 CANTERBURY COURT
 City COVINGTON State KY Zip Code 41011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A7B4F0C183AE74EB792C
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. DICKMAN, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 CANTERBURY COURT
 City ERLANGER State KY Zip Code 41018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : AE93945891443447D9D3
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 518 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DICKSON, ANNE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SANTA DOMINGO COURT
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DICKSON PROCESS SYSTEMS LLC Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2021
Transaction ID : A1B55F1726DCE4DD6871
 Amount of Each Receipt this Period 250.00
 Memo Item

B. DICKSON, ANNE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SANTA DOMINGO COURT
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DICKSON PROCESS SYSTEMS LLC Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A8614CD8EB0EA4A2C99C
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DICKSON, ANNE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SANTA DOMINGO COURT
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DICKSON PROCESS SYSTEMS LLC Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2021
Transaction ID : AC568A91DAE074B1694F
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 519 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DICKSON, ANNE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SANTA DOMINGO COURT
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DICKSON PROCESS SYSTEMS LLC Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2021
Transaction ID : AE7EB774A92C34CEEBOA
 Amount of Each Receipt this Period 250.00
 Memo Item

B. DICKSON, ANNE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SANTA DOMINGO COURT
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DICKSON PROCESS SYSTEMS LLC Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : AA9B0BCC43BA4416A831
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DICKSON, ANNE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SANTA DOMINGO COURT
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DICKSON PROCESS SYSTEMS LLC Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A4C489889CB944F92BF1
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 520 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIEHL, JUNE, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19334 KINGS GARDEN DR N
 APT R 111

City SHORELINE State WA Zip Code 98133-3818

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 06 / 22 / 2021
Transaction ID : ACBA92288797E46DF9C1

Amount of Each Receipt this Period
 35.00

Memo Item

B. DIERIEX, LEO, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2861 W MONROE AVE

City ANAHEIM State CA Zip Code 92801

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 04 / 21 / 2021
Transaction ID : A721E1DD813E54FE1A5A

Amount of Each Receipt this Period
 50.00

Memo Item

C. DIERIEX, LEO, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2861 W MONROE AVE

City ANAHEIM State CA Zip Code 92801

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 05 / 21 / 2021
Transaction ID : A1E338645A7F34591B83

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 521 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIERIEX, LEO, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2861 W MONROE AVE
 City ANAHEIM State CA Zip Code 92801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A427C1DCB144D4FDFA8F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DIETERMAN, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7092 CRYSTALVIEW SE
 City CALEDONIA State MI Zip Code 49316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 06 / 2021
Transaction ID : AFD869E1FB9484D86B42
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DIETERMAN, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7092 CRYSTALVIEW SE
 City CALEDONIA State MI Zip Code 49316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 19 / 2021
Transaction ID : AFBC82C7A325547DFAC4
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 522 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIETERMAN, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7092 CRYSTALVIEW SE
 City CALEDONIA State MI Zip Code 49316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 06 / 2021
Transaction ID : A80B74339A4644F81B45
 Amount of Each Receipt this Period 250.00
 Memo Item

B. DIETERMAN, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7092 CRYSTALVIEW SE
 City CALEDONIA State MI Zip Code 49316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 19 / 2021
Transaction ID : A366FDE3827044144BCB
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DIGIOVANNI, ALPHONSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1793 WHISPERING BROOKE DRIVE
 City NEWTOWN SQUARE State PA Zip Code 19073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A1B63FB14C9414AFAA59
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 523 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DILLE, CLINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 WOODRIDGE DR
 City TWIN FALLS State ID Zip Code 83301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2021
Transaction ID : AE75B30097D4340028BA
 Amount of Each Receipt this Period 75.00
 Memo Item

B. DILLE, CLINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 WOODRIDGE DR
 City TWIN FALLS State ID Zip Code 83301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2021
Transaction ID : AF24EE120BAD741F492A
 Amount of Each Receipt this Period 75.00
 Memo Item

C. DILLE, CLINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 WOODRIDGE DR
 City TWIN FALLS State ID Zip Code 83301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MEDICAL DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A19D800DBC55044EC9AF
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 524 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DILLON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7767 COUNTY ROAD 250

City DURANGO	State CO	Zip Code 81301
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 25 / 2021
Transaction ID : A0318E116D73F4379BDF

Amount of Each Receipt this Period
 100.00

Memo Item

B. DILLON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7767 COUNTY ROAD 250

City DURANGO	State CO	Zip Code 81301
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 25 / 2021
Transaction ID : A5D1DC175A9B144B1BDD

Amount of Each Receipt this Period
 100.00

Memo Item

C. DILLON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7767 COUNTY ROAD 250

City DURANGO	State CO	Zip Code 81301
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 25 / 2021
Transaction ID : AF1C8F979955541579C0

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 525 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DILLON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7767 COUNTY ROAD 250

City DURANGO	State CO	Zip Code 81301
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2021

Transaction ID : AE70CE736A5264BFBA64

Amount of Each Receipt this Period
100.00

Memo Item

B. DIMONDA, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1832 CENTRE POINT CIRCLE
104

City NAPERVILLE	State IL	Zip Code 60563
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIMONDA CHIROPRACTIC PHYSICIANS	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2021

Transaction ID : AD64F5558E22B43FD87B

Amount of Each Receipt this Period
50.00

Memo Item

C. DIMONDA, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1832 CENTRE POINT CIRCLE
104

City NAPERVILLE	State IL	Zip Code 60563
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIMONDA CHIROPRACTIC PHYSICIANS	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2021

Transaction ID : A8C7E7CD45A604F69A06

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 526 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIMURO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 231ST ST
 City OAKLAND GARDENS State NY Zip Code 11364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SJD FUNDING Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : AE5E8EE3BC90545D4A12
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DIMURO, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 231ST ST
 City OAKLAND GARDENS State NY Zip Code 11364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SJD FUNDING Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AD3DFE81CC79C4876931
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DIPPY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7053 SW WISTERIA TER
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : AA383F0F8C8B8445982B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 527 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIPPY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7053 SW WISTERIA TER
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A1CDF6BB287144E4E8C4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DISSLY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6651 LEYLAND PARK DRIVE
 City SAN JOSE State CA Zip Code 95120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE PEARL SOFTWARE Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A167E0BC461944B30B93
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DISSLY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6651 LEYLAND PARK DRIVE
 City SAN JOSE State CA Zip Code 95120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE PEARL SOFTWARE Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : ABBAE42886B3E4526BB2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 528 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DITTRICH, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15650 QUEENSFERRY DR.
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 27 / 2021**
Transaction ID : A6EED917F2CE240479B6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DIXON, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6918 RENATA
 City HOUSTON State TX Zip Code 77084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E/LINE VALVES Occupation (for Individual) CONTROL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 23 / 2021**
Transaction ID : A8C44B51609864EE8B2F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DIXON, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6918 RENATA
 City HOUSTON State TX Zip Code 77084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E/LINE VALVES Occupation (for Individual) CONTROL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 23 / 2021**
Transaction ID : AECED6EAEBD21417BA71
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 529 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIXON, MATHEW, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 MODENA ISLAND DR

City SAVANNAH	State GA	Zip Code 31411
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATLANTIC RADIOLOGY ASSOCIATES	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2021

Transaction ID : AA5B90DA7C894447BBF9

Amount of Each Receipt this Period
500.00

Memo Item

B. DOAK, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16222 MONTEREY LANE 272

City HUNTINGTON BEACH	State CA	Zip Code 92649
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2021

Transaction ID : A85D881E7AD144B859DB

Amount of Each Receipt this Period
35.00

Memo Item

C. DOBISE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 OAK RIDGE CT

City MANORVILLE	State NY	Zip Code 11949
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2021

Transaction ID : AF074ACEC9F1C42358AB

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	635.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 530 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOBRINSKI, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22141 SH 51
 City OKEENE State OK Zip Code 73763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A0EC2402809534F3AA99
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. DOBRINSKI, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22141 SH 51
 City OKEENE State OK Zip Code 73763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A5F9A6059A4C84893881
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. DODD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 MONTAIR DRIVE
 City DANVILLE State CA Zip Code 94526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A34DAEC1856114D6AA1C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 531 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DODD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 MONTAIR DRIVE
 City DANVILLE State CA Zip Code 94526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A0A9621B6736A446E9EE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DODD, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 PLAZA ESCONDIDO
 City HORSESHOE BAY State TX Zip Code 78657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2021
Transaction ID : AFA7B27253B214D288C3
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DODGE, CLINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4947 RIDGEVIEW DR
 City ARNOLD State MO Zip Code 63010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 20 / 2021
Transaction ID : A7972F43BBB95481891E
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 532 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DODGE, CLINTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4947 RIDGEVIEW DR

City ARNOLD	State MO	Zip Code 63010
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OWNER	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : ADD1C89B83AA4472DA94

Amount of Each Receipt this Period
150.00

Memo Item

B. DODGE, CLINTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4947 RIDGEVIEW DR

City ARNOLD	State MO	Zip Code 63010
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OWNER	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A1E956F88153E44A3A64

Amount of Each Receipt this Period
75.00

Memo Item

C. DODGE, CLINTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4947 RIDGEVIEW DR

City ARNOLD	State MO	Zip Code 63010
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OWNER	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : AC5CE57671E1F4DFBA18

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 533 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DODGE, CLINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4947 RIDGEVIEW DR
 City ARNOLD State MO Zip Code 63010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A2B6F8D1861EE4143806
 Amount of Each Receipt this Period 75.00
 Memo Item

B. DODGE, JOHN, F., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2904 HIDDEN PEACHES RD
 City CARRABELLE State FL Zip Code 32322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 12 / 2021
Transaction ID : A9A09AB7B789F4E4497D
 Amount of Each Receipt this Period 62.50
 Memo Item

C. DODGE, JOHN, F., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2904 HIDDEN PEACHES RD
 City CARRABELLE State FL Zip Code 32322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 03 / 12 / 2021
Transaction ID : A05A0A0E825CF47ADBBB
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	387.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 534 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DODGE, JOHN, F., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2904 HIDDEN PEACHES RD
 City CARRABELLE State FL Zip Code 32322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 337.50

Date of Receipt 06 / 14 / 2021
Transaction ID : A44175354CDC9484DAFF
 Amount of Each Receipt this Period 25.00
 Memo Item

B. DODGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1169 N ANTILLES CIR
 City SALT LAKE CITY State UT Zip Code 84116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) INSURANCE AND INVESTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A897F66F328B14E0CB53
 Amount of Each Receipt this Period 15.00
 Memo Item

C. DODGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1169 N ANTILLES CIR
 City SALT LAKE CITY State UT Zip Code 84116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) INSURANCE AND INVESTING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : AE9A8912BDBA14FEBA58
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 535 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DODGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1169 N ANTILLES CIR
 City SALT LAKE CITY State UT Zip Code 84116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) INSURANCE AND INVESTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A3B1DF7DEEA4348BAB7I
 Amount of Each Receipt this Period 15.00
 Memo Item

B. DODGE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1169 N ANTILLES CIR
 City SALT LAKE CITY State UT Zip Code 84116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) INSURANCE AND INVESTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A986F5C080E89488A88E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DODSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY APT 1017
 City FORT WORTH State TX Zip Code 76107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : AB82D045E3CFC4408A97
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 536 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DODSON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 MUSEUM WAY
 APT 1017
 City FORT WORTH State TX Zip Code 76107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AB95D2BC0A3DB4725A1A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DOLL, BERNADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20864 COUNTY RD 43
 City RICHMOND State MN Zip Code 56368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2021
Transaction ID : A9BBB8FEAD4A6462889D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DOLL, BERNADINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20864 COUNTY RD 43
 City RICHMOND State MN Zip Code 56368
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A4E4D45CC49B54CFD94B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 537 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMBROW, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 RAMSEY ROAD
 City SAN BENITO State TX Zip Code 78586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2021
Transaction ID : A03AE6E8479624BBAB69
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DOMBROW, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 RAMSEY ROAD
 City SAN BENITO State TX Zip Code 78586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 10 / 2021
Transaction ID : AF4DFE8940676424C941
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DOMBROW, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 RAMSEY ROAD
 City SAN BENITO State TX Zip Code 78586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A75E2566E773248E7807
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 538 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMBROW, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 RAMSEY ROAD
 City SAN BENITO State TX Zip Code 78586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : AC87AF31CD64E4059A62
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DOMBROW, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 RAMSEY ROAD
 City SAN BENITO State TX Zip Code 78586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : AB108CCD85AAD494F88B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DOMBROW, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 RAMSEY ROAD
 City SAN BENITO State TX Zip Code 78586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : AD01CFA9648104F5BBCF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 539 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMBROW, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 RAMSEY ROAD
 City SAN BENITO State TX Zip Code 78586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RENTALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A4C7EFFEE885A4FF09DE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A7C4C2AE1F37E42F0AFB
 Amount of Each Receipt this Period 25.00
 Memo Item

C. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A8DCD4A6385674985B6E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 540 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt **03 / 26 / 2021**
Transaction ID : AAA3D8056C53548B7A4E
 Amount of Each Receipt this Period 42.00
 Memo Item

B. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt **04 / 19 / 2021**
Transaction ID : A86CA46B111414F2287E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : AA4ECA9A7606545F4B12
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	134.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 541 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A1499FA730D7E46189CC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A1FF4D34ACC15420C8D4
 Amount of Each Receipt this Period 42.00
 Memo Item

C. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AFDE56B3A85E643898EF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 142.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 542 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMBROWSKI, STEPHANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7852 83 STREET
 City RIDGEWOOD State NY Zip Code 11385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 577.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A441D3FE7DC934170AF3
 Amount of Each Receipt this Period 42.00
 Memo Item

B. DOMEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 HARBOR HILL DR.
 City AUSTIN State TX Zip Code 78734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A253FEC26AD6942C5A7D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DOMEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 HARBOR HILL DR.
 City AUSTIN State TX Zip Code 78734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A422F500145934310A7A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	142.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 543 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMINGUZ, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4876 RUTH AVE
 City LOA ANGLLES State CA Zip Code 90041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A5BCF3CE6C67C4ACBB7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DONNELL, NILS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 PIEDMONT DR
 City ABILENE State TX Zip Code 79601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A45F4442E69AF44D3979
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DONOHOE, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31146 SOUTH HWY 3
 City MEDIMONT State ID Zip Code 83842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : AFD513A6805024D8881B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 544 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DORAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 FOOTHILL DRIVE
 City SHINGLE SPRINGS State CA Zip Code 95682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SIERRA CAPITAL INVESTORS Occupation (for Individual) PROPERTY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 16 / 2021**
Transaction ID : ADC8D9D96B6574E05A48
 Amount of Each Receipt this Period 150.00
 Memo Item

B. DORMAN, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 CHERRY HILLS DRIVE
 City ENGLEWOOD State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MINISTRY OF AVAILABILITY Occupation (for Individual) COMMUNITY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 14 / 2021**
Transaction ID : A232D9B2810EC4FD382C
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DOUGHARTY, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1602 VALENTINE STREET
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEERS AND CONSTRUCTORS, LTD. Occupation (for Individual) ENGINEERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 27 / 2021**
Transaction ID : A1B9C3077F671405B913
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 545 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOUGHARTY, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1602 VALENTINE STREET
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S&B ENGINEERS AND CONSTRUCTORS, LTD. Occupation (for Individual) ENGINEERING
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 28 / 2021**
Transaction ID : A3951780A7ED843B5913
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DOVE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 ROCK ROAD
 City BELLEVILLE State KS Zip Code 66935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A6F034DC7A57D4894B01
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DOVE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 ROCK ROAD
 City BELLEVILLE State KS Zip Code 66935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : A798602F1057D42BEA1C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 546 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOWDA, JOHN, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 856 LAKE JUNE RD
 City LAKE PLACID State FL Zip Code 33852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : ABFA1720306254CEB9C2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. DOWNING, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 ROBERT LEE ROAD
 City TRUSSVILLE State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2021
Transaction ID : A82D4B9D522AE4C93873
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. DOWNING, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 ROBERT LEE ROAD
 City TRUSSVILLE State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2021
Transaction ID : AF9D23D18E99340CD9A5
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 547 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOWNING, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 ROBERT LEE ROAD
 City TRUSSVILLE State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : A703EF5D532DE4AAAAE9
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. DOWNING, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 ROBERT LEE ROAD
 City TRUSSVILLE State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : A7A623AB8FFDB4129AB0
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. DOWNING, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3369 ROBERT LEE ROAD
 City TRUSSVILLE State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A058D7F39E330412D93C
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 548 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOWNS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 PEACHTREE BATTLE AVE

City ATLANTA	State GA	Zip Code 30305
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 22 / 2021
Transaction ID : A11E61FCE58844DB4854

Amount of Each Receipt this Period
 100.00

Memo Item

B. DOWNS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 PEACHTREE BATTLE AVE

City ATLANTA	State GA	Zip Code 30305
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 22 / 2021
Transaction ID : A3D7E58B719F645B1BCA

Amount of Each Receipt this Period
 100.00

Memo Item

C. DOWNS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 PEACHTREE BATTLE AVE

City ATLANTA	State GA	Zip Code 30305
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 22 / 2021
Transaction ID : AF82D82FD20294DC1828

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 549 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOWNS, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 PEACHTREE BATTLE AVE
 City ATLANTA State GA Zip Code 30305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A2357F83696264DB1B7E
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DRAPER, RUBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 926 BAYNE RD
 City MALVERN State AR Zip Code 72104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 02 / 2021
Transaction ID : AAAD1D3C47D474772B79
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DRAPER, RUBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 926 BAYNE RD
 City MALVERN State AR Zip Code 72104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A03551F74BC8F4DADADC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 550 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DRENKOW, CLARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 HOOK BILL DR
 City MCKINNEY State TX Zip Code 75072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.75

Date of Receipt 06 / 14 / 2021
Transaction ID : A092CA5D3113E4434B84
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DREWES, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MEADOWOOD W
 City GLEN HEAD State NY Zip Code 11545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYU WINTHROP HOSPITAL Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 04 / 20 / 2021
Transaction ID : AA3132638533843FBA7F
 Amount of Each Receipt this Period 25.00
 Memo Item

C. DREWES, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MEADOWOOD W
 City GLEN HEAD State NY Zip Code 11545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYU WINTHROP HOSPITAL Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 27 / 2021
Transaction ID : ACECF9F113B0244F28FC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 551 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DREWES, WENDY, , ,

Mailing Address 7 MEADOWOOD W

City GLEN HEAD State NY Zip Code 11545

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU WINTHROP HOSPITAL Occupation (for Individual) RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A394D06F0661E49A79B9

Amount of Each Receipt this Period 25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DREWES, WENDY, , ,

Mailing Address 7 MEADOWOOD W

City GLEN HEAD State NY Zip Code 11545

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU WINTHROP HOSPITAL Occupation (for Individual) RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 27 / 2021
Transaction ID : AC2CE3F728F494DD78C9

Amount of Each Receipt this Period 35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DREWES, WENDY, , ,

Mailing Address 7 MEADOWOOD W

City GLEN HEAD State NY Zip Code 11545

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYU WINTHROP HOSPITAL Occupation (for Individual) RN

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A895747A9D90444A49CE

Amount of Each Receipt this Period 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 552 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DREWES, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 MEADOWOOD W
 City GLEN HEAD State NY Zip Code 11545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYU WINTHROP HOSPITAL Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AF2B0623D6B3B438D93F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DUBECK, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 NICOLE RD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINBOW CLINIC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 17 / 2021
Transaction ID : AA22F5020FDCD4F3D81B
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DUBECK, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 NICOLE RD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINBOW CLINIC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 10 / 2021
Transaction ID : A13FC89A9EDF3444B99B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 553 OF 3012	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	11c	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	15	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUBECK, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 NICOLE RD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINBOW CLINIC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 17 / 2021
Transaction ID : A2EC78B07753D4A7090B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DUBECK, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 NICOLE RD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINBOW CLINIC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A9C801E66DB714C789D8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DUBECK, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 NICOLE RD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINBOW CLINIC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A3EE1D9ABC7C5482FB68
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 554 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUBECK, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 NICOLE RD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINBOW CLINIC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A55321A54198B4418971
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DUBECK, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 NICOLE RD
 City CLARKSVILLE State TN Zip Code 37040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAINBOW CLINIC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A12EDB81DFA424E0CB95
 Amount of Each Receipt this Period 35.00
 Memo Item

C. DUBOIS WETTERHUUS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 14988
 City HUMBLE State TX Zip Code 77347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A8B01A992AE1B4CD3AE6
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 555 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUBOIS WETTERHUUS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 14988
 City HUMBLE State TX Zip Code 77347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A7BBDE1BE816B44DC917
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DUCZEMINSKI, CLARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 COUNTY ROUTE 93
 City SLATE HILL State NY Zip Code 10973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 07 / 2021
Transaction ID : AA47831BE22C944518A4
 Amount of Each Receipt this Period 300.00
 Memo Item

C. DUDLEY, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 ROWAYTON AVE
 City NORWALK State CT Zip Code 06853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AD41A96EAF7A94D069F3
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 556 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUFFIN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1883 E RICHARD RD
 City SANDY State UT Zip Code 84093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J&L MANAGEMENT CO. Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A50004EC03C044977884
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. DUFFIN, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1883 E RICHARD RD
 City SANDY State UT Zip Code 84093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J&L MANAGEMENT CO. Occupation (for Individual) BUSINESS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A52584D0209184E2E8F7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. DUGGAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 PRESERVE LANE
 City COLUMBIA State SC Zip Code 29209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : AF5964F44A31C4010B26
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 557 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUIN, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7682 COUNTY ROAD 2
 City DUMONT State MN Zip Code 56236
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A2876CCD3825348B7B5
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. DUKA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34013 ROBERTS RD
 City EASTLAKE State OH Zip Code 44095
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A928893A5364E44938F2
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. DUNN, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 WEST MINNESOTA AVENUE
 City DELAND State FL Zip Code 32720
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) TOWN AND COUNTRY REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A471859F3BA3F4113AB1
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 558 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUNN, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 WEST MINNESOTA AVENUE
 City DELAND State FL Zip Code 32720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOWN AND COUNTRY REALTY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AB0789FDD8E744A2E84E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DUNNE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 79 STAUFFER PLAZE
 City OAKLAND State CA Zip Code 94619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : AAFB82D2622E44108BD6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DUNNE, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 79 STAUFFER PLAZE
 City OAKLAND State CA Zip Code 94619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A05880033B52842E1B11
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 559 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUNN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 KORNBLUM AVE
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AE9FF531467964331A22
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DUPUIS, DANIELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 8TH ST
 City WIND GAP State PA Zip Code 18091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY WIRE PRODUCTS CORP. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : AE9BE8BF13B514A9A97E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DUPUIS, DANIELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 8TH ST
 City WIND GAP State PA Zip Code 18091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY WIRE PRODUCTS CORP. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 02 / 2021
Transaction ID : AFB1C58AF5DB44DB5B85
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 560 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUPUIS, DANIELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 8TH ST
 City WIND GAP State PA Zip Code 18091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY WIRE PRODUCTS CORP. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A0092867E8AB040499BE
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. DUPUIS, DANIELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 8TH ST
 City WIND GAP State PA Zip Code 18091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURY WIRE PRODUCTS CORP. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AA87C923159E54FBA8E0
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. DURLIAT, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 VIA PORTOFINO
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2021
Transaction ID : A2C7894E797184AD3A9C
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 561 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DURLIAT, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 VIA PORTOFINO
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A6D80BABAC02246ACAAI
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. DURLIAT, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 VIA PORTOFINO
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A1B73134010A64362B56
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. DURLIAT, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 VIA PORTOFINO
 City NAPLES State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A87F8EAEF17334068903
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 562 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DURSO, ANTHONY, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11528 OKALOOSA DR
 City VENICE State FL Zip Code 34293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A4631932450984675A65
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DUTTA, ABHIJIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 BEDSTRAW WAY
 City CAPON BRIDGE State WV Zip Code 26711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : A0C1983C9FCB1441D963
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DUTTA, ABHIJIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 BEDSTRAW WAY
 City CAPON BRIDGE State WV Zip Code 26711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : A7868479FC3AD4D2BB25
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 563 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUTTA, ABHIJIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 BEDSTRAW WAY
 City CAPON BRIDGE State WV Zip Code 26711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : A33D7F42BDF6441EB845
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DUTTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2282 DRY ROAD
 City SPEEDWELL State VA Zip Code 24374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 24 / 2021**
Transaction ID : A8C90E61B48844489822
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DUTTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2282 DRY ROAD
 City SPEEDWELL State VA Zip Code 24374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 24 / 2021**
Transaction ID : AE8AE132851F541D2957
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 564 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DYCHES, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4030 BERKELEY PARK DR
 City DULUTH State GA Zip Code 30096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUCID EDUCATION Occupation (for Individual) TEACHERS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AC2E18C2B0100493AB1A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. DYER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8003 FIRETHORN LANE
 City CHEYENNE State WY Zip Code 82009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A9EA69467C3634271BC7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DYER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8003 FIRETHORN LANE
 City CHEYENNE State WY Zip Code 82009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A9CA1981A9694478D8D3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 565 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EASOM, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59 CANYON OAK DR.
 City SAN RAFAEL State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A77B90DD895274832A5F
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 13 / 2021
Transaction ID : A22C10FF3ED29421581B
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A9844E1D92F7A45A8B83
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 566 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2021
Transaction ID : A62E0FCEFF42848F5B90
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2021
Transaction ID : A1A7283233A464C27987
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AEB58256453894A38BB7
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 567 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EAST, ALICE, GKK, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 56

City LINN	State TX	Zip Code 78563
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2021

Transaction ID : AB2CBCA2B7CEA4490A3

Amount of Each Receipt this Period
50.00

Memo Item

B. EAST, ALICE, GKK, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 56

City LINN	State TX	Zip Code 78563
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2021

Transaction ID : AEA5C68D3ACF4901BFF

Amount of Each Receipt this Period
250.00

Memo Item

C. EAST, ALICE, GKK, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 56

City LINN	State TX	Zip Code 78563
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2021

Transaction ID : A6D7CE5C2F8434537877

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 568 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. EAST, ALICE, GKK, ,

Mailing Address **PO BOX 56**

City **LINN** State **TX** Zip Code **78563**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF** Occupation (for Individual) **RANCHER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt
04 / 09 / 2021

Transaction ID : A205F9CB0BEC849AEA70

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. EAST, ALICE, GKK, ,

Mailing Address **PO BOX 56**

City **LINN** State **TX** Zip Code **78563**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF** Occupation (for Individual) **RANCHER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt
04 / 13 / 2021

Transaction ID : A176067BDAAF04E178FD

Amount of Each Receipt this Period
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. EAST, ALICE, GKK, ,

Mailing Address **PO BOX 56**

City **LINN** State **TX** Zip Code **78563**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **SELF** Occupation (for Individual) **RANCHER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1450.00**

Date of Receipt
05 / 03 / 2021

Transaction ID : ACA490A1A60C34949A99

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **350.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 569 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021
Transaction ID : A03483B2F8C25402F931
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A4B48F435107F4640AD0
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. EAST, ALICE, GKK, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 56
 City LINN State TX Zip Code 78563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A5BA31502DF5D49808E9
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 570 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EAST, ALICE, GKK, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 56

City LINN	State TX	Zip Code 78563
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2021

Transaction ID : AB516F44B7F8740C2813

Amount of Each Receipt this Period
50.00

Memo Item

B. EAST, ALICE, GKK, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 56

City LINN	State TX	Zip Code 78563
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2021

Transaction ID : A7EC52033D7914EB8B9B

Amount of Each Receipt this Period
250.00

Memo Item

C. EAST, ALICE, GKK, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 56

City LINN	State TX	Zip Code 78563
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2021

Transaction ID : A0EB78C156F1E4FDC891

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 571 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EASTERDAY, ALVIN DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6501 W EMJAY AVE

City TUCSON	State AZ	Zip Code 85735
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENTREPRENEUR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : AAF336D6E340D4BBC888

Amount of Each Receipt this Period
50.00

Memo Item

B. EASTERDAY, ALVIN DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6501 W EMJAY AVE

City TUCSON	State AZ	Zip Code 85735
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENTREPRENEUR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : AA7873E0388644552AD2

Amount of Each Receipt this Period
50.00

Memo Item

C. EAST, VIRGIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5204 WINDSTONE DR.

City KELLER	State TX	Zip Code 76244
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2021

Transaction ID : A26ED5CC495B749DFA35

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 572 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EAST, VIRGIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5204 WINDSTONE DR.

City KELLER	State TX	Zip Code 76244
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : A7D7DE7782910450A934

Amount of Each Receipt this Period
50.00

Memo Item

B. EAVES, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76 DREAM CT

City METAIRIE	State LA	Zip Code 70001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) ARTIST
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2021

Transaction ID : A253C3C18427E40519B5

Amount of Each Receipt this Period
35.00

Memo Item

C. EAVES, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 76 DREAM CT

City METAIRIE	State LA	Zip Code 70001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) ARTIST
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : A76627E398F6848F9979

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 573 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EBERHART, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2363

City CORDOVA	State AK	Zip Code 99574-2363
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : AFB6A50EA55AB4330BAE

Amount of Each Receipt this Period
50.00

Memo Item

B. EBERHART, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2363

City CORDOVA	State AK	Zip Code 99574-2363
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : A8EC85346F8614D298FD

Amount of Each Receipt this Period
25.00

Memo Item

C. EBERHART, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2363

City CORDOVA	State AK	Zip Code 99574-2363
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A649552E9DE94473994B

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 574 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
EBERHART, MICHAEL, , ,

Mailing Address **PO BOX 2363**

City **CORDOVA** State **AK** Zip Code **99574-2363**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
05 / 12 / 2021

Transaction ID : A7957F5CF98B54B09A81

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
EBERHART, MICHAEL, , ,

Mailing Address **PO BOX 2363**

City **CORDOVA** State **AK** Zip Code **99574-2363**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
05 / 22 / 2021

Transaction ID : A744997C9A2A04544A61

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
EBERHART, MICHAEL, , ,

Mailing Address **PO BOX 2363**

City **CORDOVA** State **AK** Zip Code **99574-2363**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
06 / 12 / 2021

Transaction ID : A7164058A98844639B08

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 575 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EBERHART, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2363
 City CORDOVA State AK Zip Code 99574-2363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AEDADE28FFD2742C2A4F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ECHOLS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1403 EMMOTT DR.
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A6B7F5E90E5D04540BC9
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ECKMANN, IRIS, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2708 18TH AVE SW
 City MINOT State ND Zip Code 58701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A70D0ED9D0D59450EA4D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 576 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EDER, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 PEANUT LANE
 City CAMERON State NC Zip Code 28326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMG Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 01 / 14 / 2021
Transaction ID : ADE6B35FC600240A39B5
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. EDWARDS, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 WASHINGTON ST
 City HANNIBAL State MO Zip Code 63401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 02 / 18 / 2021
Transaction ID : ACEB9CC22BFD04D16BFA
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. EDWARDS, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2508 E OAKLAND RIDGE DR.
 City COLUMBIA State MO Zip Code 65202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 05 / 21 / 2021
Transaction ID : ABB345C06B627489C8B5
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	785.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 577 OF 3012	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EDWARDS, JACQUELINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2508 E OAKLAND RIDGE DR.

City COLUMBIA	State MO	Zip Code 65202
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
06 / 21 / 2021
Transaction ID : A790038D9E8F44B9FB8F

Amount of Each Receipt this Period
35.00

Memo Item

B. EFLAND, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 BROOKHOLLOW RD

City EFLAND	State NC	Zip Code 27243
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 27 / 2021
Transaction ID : A4FF2936F52A547B5A12

Amount of Each Receipt this Period
100.00

Memo Item

C. EFLAND, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 BROOKHOLLOW RD

City EFLAND	State NC	Zip Code 27243
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
04 / 27 / 2021
Transaction ID : A146B873F3012458C93C

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 578 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EFLAND, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 BROOKHOLLOW RD

City EFLAND	State NC	Zip Code 27243
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2021

Transaction ID : AB508FFAC86CB4E2D8C1

Amount of Each Receipt this Period
100.00

Memo Item

B. EFLAND, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 BROOKHOLLOW RD

City EFLAND	State NC	Zip Code 27243
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2021

Transaction ID : AFE6750A8F08D4AF587C

Amount of Each Receipt this Period
100.00

Memo Item

C. EHMAN, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2953 CREEK VALLEY LANE

City APPLETON	State WI	Zip Code 54914
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2021

Transaction ID : A93E0839BD2B945A4921

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 579 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELDER, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 462 ENCLAVE CT SE
 City GRAND RAPIDS State MI Zip Code 49546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK ELDER & ASSOCIATES,INC. Occupation (for Individual) PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AFE5CFD9DBAA44686AA:
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ELDER, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 462 ENCLAVE CT SE
 City GRAND RAPIDS State MI Zip Code 49546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JK ELDER & ASSOCIATES,INC. Occupation (for Individual) PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A2447911D0B3944B89B5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ELDRD, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5623 SUNNYVIEW RD NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 07 / 2021
Transaction ID : A74DE581051FB4258BAD
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 580 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELDRED, CLIFTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5623 SUNNYVIEW RD NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A803441DB022147D88EF
 Amount of Each Receipt this Period 75.00
 Memo Item

B. ELDREDGE, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8646 BLUE FLAG WAY
 City NAPLES State FL Zip Code 34109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEYSTONE Occupation (for Individual) SENIOR HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A74ED3C11667A4CF8912
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ELDREDGE, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8646 BLUE FLAG WAY
 City NAPLES State FL Zip Code 34109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEYSTONE Occupation (for Individual) SENIOR HEALTH CARE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A0CC53BD42F484884855
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 581 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELIQUE, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 354 HARPERS FERRY AVE
 City LAS VEGAS State NV Zip Code 89148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A29F24DB8FF7E4BC5BF7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ELKINS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 772590
 City STEAMBOAT SPRINGS State CO Zip Code 80477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEAMBOAT SOTHEBY'S INTERNATIONAL REAL Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A7FB245E5EFA841988C6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ELKINS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 772590
 City STEAMBOAT SPRINGS State CO Zip Code 80477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEAMBOAT SOTHEBY'S INTERNATIONAL REAL Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A67063EEBB05D4155BF9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 582 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELLEMAN, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 NUECES STREET
 4305
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLIED INFORMATION SCIENCES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : AAC83404AB10A476A99A
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. ELLEMAN, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 NUECES STREET
 4305
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLIED INFORMATION SCIENCES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : A1FE79C352A634732A48
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ELLEMAN, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 NUECES STREET
 4305
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLIED INFORMATION SCIENCES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A5EF8D7BDF32645BD803
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 583 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELLIOTT, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 736**

City RUSKIN	State FL	Zip Code 33575
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2021

Transaction ID : A6EF5368DCD814C9FB5C

Amount of Each Receipt this Period

35.00

 Memo Item

B. ELLIS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6948 E. FAIRBROOK ST.**

City LONG BEACH	State CA	Zip Code 90815
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELLIS EQUIPMENT INC.	Occupation (for Individual) VP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2021

Transaction ID : A896C2FA40D8C48378EA

Amount of Each Receipt this Period

100.00

 Memo Item

C. ELLIS, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **6948 E. FAIRBROOK ST.**

City LONG BEACH	State CA	Zip Code 90815
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELLIS EQUIPMENT INC.	Occupation (for Individual) VP
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2021

Transaction ID : AADFDC8820C0D4D4796D

Amount of Each Receipt this Period

100.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 584 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELLIS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6948 E. FAIRBROOK ST.
 City LONG BEACH State CA Zip Code 90815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELLIS EQUIPMENT INC. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2021
Transaction ID : AF1F2823B2BD14ACE99A
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ELLIS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6948 E. FAIRBROOK ST.
 City LONG BEACH State CA Zip Code 90815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELLIS EQUIPMENT INC. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A2A08BCB905F540BE85C
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ELLIS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 NW 92ND PLACE
 City PORTLAND State OR Zip Code 97229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEAR ELECTRIC Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2021
Transaction ID : AAF38786C0D044E6892C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 585 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELLIS, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 616 NW 92ND PLACE

City PORTLAND	State OR	Zip Code 97229
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEAR ELECTRIC	Occupation (for Individual) PROJECT MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : A1CD7331E630F44F2B0C

Amount of Each Receipt this Period
50.00

Memo Item

B. ELLIS, REBECCA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1358 BENT TREE DRIVE

City HUDSONVILLE	State MI	Zip Code 49426
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2021

Transaction ID : A6435579161494981AC4

Amount of Each Receipt this Period
35.00

Memo Item

C. ELSBERRY, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2141 JACKSON HWY

City CHEHALIS	State WA	Zip Code 98532
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) JJ BERRY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2021

Transaction ID : AE3483D18E9764885810

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 586 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELSBERRY, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2141 JACKSON HWY
 City CHEHALIS State WA Zip Code 98532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JJ BERRY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : A7FABB7ECF40A44EDA6/
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. ELSBERRY, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2141 JACKSON HWY
 City CHEHALIS State WA Zip Code 98532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JJ BERRY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : AE2C1A9FB4888412B8D1
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ELSBERRY, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2141 JACKSON HWY
 City CHEHALIS State WA Zip Code 98532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JJ BERRY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : ACD61B780D9FD463D878
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 587 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELZNER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 ROSASTONE
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2021
Transaction ID : A5B88E3E21BC94D579EE
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. ELZNER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 ROSASTONE
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : AF69A5DA6D7B140CAA95
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. ELZNER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 ROSASTONE
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021
Transaction ID : ADA5C1B5D05724B0C902
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 588 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELZNER, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 895 ROSASTONE
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A22CA69C6F865424CB0B
 Amount of Each Receipt this Period 250.00
 Memo Item

B. EMBREY, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2130 SUNSET BLVD
 City HOUSTON State TX Zip Code 77005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 15 / 2021
Transaction ID : AFA8263FD183A4B958D7
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. EMERY, CAROLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2765 PALAZZO GROVE
 City COLORADO SPRINGS State CO Zip Code 80920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A4DB5F26DB1314CA3AD0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 589 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EMERY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2765 PALAZZO GROVE

City COLORADO SPRINGS	State CO	Zip Code 80920
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2021

Transaction ID : A7E9E9DD3FEB744D6955

Amount of Each Receipt this Period
100.00

Memo Item

B. EMERY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2765 PALAZZO GROVE

City COLORADO SPRINGS	State CO	Zip Code 80920
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : A4994774FB0064CDC9F8

Amount of Each Receipt this Period
100.00

Memo Item

C. EMERY, CAROLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2765 PALAZZO GROVE

City COLORADO SPRINGS	State CO	Zip Code 80920
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : AF125C671978A4F23B93

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 590 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EMERY, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3765 PALAZZO GROVE

City COLORADO SPRINGS	State CO	Zip Code 80920
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A0070F118E11E47C5BFD
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. EMERY, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3765 PALAZZO GROVE

City COLORADO SPRINGS	State CO	Zip Code 80920
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A75680D252E7F4A6080F
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. EMERY, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3765 PALAZZO GROVE

City COLORADO SPRINGS	State CO	Zip Code 80920
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : AB60F9258294241308AC
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 591 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EMERY, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3765 PALAZZO GROVE
 City COLORADO SPRINGS State CO Zip Code 80920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 06 / 03 / 2021
Transaction ID : ABA79387DC6A3468E927
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ENDSLEY, JOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2181 VAL VERDE
 City MC GREGOR State TX Zip Code 76657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 26 / 2021
Transaction ID : A2C08B602837147C381D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ENGELMAN, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1849 LA BELLEZZA GRV
 City COLORADO SPRINGS State CO Zip Code 80919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 28 / 2021
Transaction ID : AE9CAA223CCD84CD69F9
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 592 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ENTZEROTH, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 CASTLE BLUFF DR.
 City SAINT CHARLES State MO Zip Code 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A21B591F2F8204FE5870
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ENTZEROTH, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 CASTLE BLUFF DR.
 City SAINT CHARLES State MO Zip Code 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : A96AD17D47CA84416BA7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ENTZEROTH, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 CASTLE BLUFF DR.
 City SAINT CHARLES State MO Zip Code 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : AF3DC44882F1146DA8DF
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 593 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ENTZEROTH, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 CASTLE BLUFF DR.
 City SAINT CHARLES State MO Zip Code 63304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : ADF9796E7F9E4454F9DE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. EPSTEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4849 PEREGRINE POINT CIRCLE N
 City SARASOTA State FL Zip Code 34231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 13 / 2021
Transaction ID : AFBE16F65AA0845DAB1F
 Amount of Each Receipt this Period 25.00
 Memo Item

C. EPSTEIN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4849 PEREGRINE POINT CIRCLE N
 City SARASOTA State FL Zip Code 34231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 03 / 2021
Transaction ID : AC24B338194E540B78D7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 594 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ERICKSON, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25995 BIRDSONG RD.
 City SEDALIA State MO Zip Code 65301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : AB7CC27445AAB428FA17
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ESPINA, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4913 ORANGE GROVE WAY
 City PALM HARBOR State FL Zip Code 34684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A741AAD5A2F814552B8C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ESPOSITO, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1160 SYCAMORE ST.
 City SPRINGDALE State PA Zip Code 15301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IHI POWER SERVICES Occupation (for Individual) PRODUCTION SUPERVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AA2CD982106594A3AA27
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 595 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ESPOSITO, LUIGI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2449 ROSSETT ST
UNIT A

City FORT LEE State NJ Zip Code 07024

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021

Transaction ID : AAB6C119479FB47BFA51

Amount of Each Receipt this Period
35.00

Memo Item

B. ESPOSITO, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4774 WASHINGTON AV

City ORLANDO State FL Zip Code 32819

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021

Transaction ID : A9AC9DED91A4646FA9B9

Amount of Each Receipt this Period
50.00

Memo Item

C. ESPOSITO, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4774 WASHINGTON AV

City ORLANDO State FL Zip Code 32819

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021

Transaction ID : A1E05EE5E5A8F410F982

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 596 OF 3012	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	11c	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	15	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ESTERLY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 VICTORIA DRIVE
 City DOUGLASSVILLE State PA Zip Code 19518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HEALTH CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AC7D24E8A63DA4CE18C9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ETHERIEDGE, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 MEMORY LN
 City HAYDEN State AL Zip Code 35079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : ACB2DDD7BF5BF446082B
 Amount of Each Receipt this Period 10.00
 Memo Item

C. EUBANK, LAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 COTTON XING
 City SAVANNAH State GA Zip Code 31411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRC, LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 20 / 2021
Transaction ID : A62FCC268612C48C38B9
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 597 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EVANS, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 DESERT AIRE DR SW
 City MATTAWA State WA Zip Code 99349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : A72E3BC51D986431F9A4
 Amount of Each Receipt this Period
 260.00
 Memo Item

B. EVANS, LOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17203 MARIANNE CIRCLE
 City DALLAS State TX Zip Code 75252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGHORN Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A1752C85BB222476E9D5
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. EVANS, LOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17203 MARIANNE CIRCLE
 City DALLAS State TX Zip Code 75252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGHORN Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A5F6D6D36685B4412B86
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 598 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EVANS, LOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17203 MARIANNE CIRCLE
 City DALLAS State TX Zip Code 75252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGHORN Occupation (for Individual) MGT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : ACAB236A8CD364E28BC3
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. EVANS, NANCY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 ARCH ST
 City DELRAN State NJ Zip Code 08075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A0B59FF48560C4B348BA
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. FAGAN HERMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 542 ROUND HILL RD
 City GREENWICH State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : AE96D8B501605444C851
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 599 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAGAN HERMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 542 ROUND HILL RD
 City GREENWICH State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A34A5B0BDE232431EB02
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. FAIRBOURN, EARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5805 FRIARS RD 2412
 City SAN DIEGO State CA Zip Code 92110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A42E3DADE087D4BCFA51
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FAIRBOURN, EARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5805 FRIARS RD 2412
 City SAN DIEGO State CA Zip Code 92110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A2014E1795FF840ADA04
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 600 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAJARDO, RUBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18069 SANTA RITA STREET
 City ENCINO State CA Zip Code 91316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 G. HOPE D. YERRO MD INC OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 07 / 2021
Transaction ID : A108F2E9F729746BCA65
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FALK, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1807 NW ASH DRIVE
 City ANKENY State IA Zip Code 50023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 16 / 2021
Transaction ID : AAE806A163B46451AB7C
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FANNON, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 697-332 GOLD RUN RD.
 City SUSANVILLE State CA Zip Code 96130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 STATE OF CA CORRECTIONAL OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 15 / 2021
Transaction ID : AFECD8485F3CB4FF0B7B
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 601 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FARNHAM, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 SURREY LANE
 City BOSSIER CITY State LA Zip Code 71111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOLUTE ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A088026C34A9049E4BC3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FARNHAM, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2115 SURREY LANE
 City BOSSIER CITY State LA Zip Code 71111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOLUTE ENERGY Occupation (for Individual) GEOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AFEE2DAFD9AAD43CBBB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FAUBION, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1733 NORMAL HILL
 City EDMOND State OK Zip Code 73034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNOWLEDGE CONSULTANTS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 08 / 2021
Transaction ID : AE7E563CB582F4790A02
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 602 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAUBION, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1733 NORMAL HILL
 City EDMOND State OK Zip Code 73034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNOWLEDGE CONSULTANTS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A1DBC AFC365DB44CA91/
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FAUBION, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1733 NORMAL HILL
 City EDMOND State OK Zip Code 73034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNOWLEDGE CONSULTANTS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A1D384521C8D243F0A25
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FAULKINBERRY, GRETA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 289
 City BULLARD State TX Zip Code 75757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A1A726AAB1F4644F78A0
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 603 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAULKNER, CLAUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 WHITMAN DR.
 City WILMINGTON State DE Zip Code 19808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A0A4714ADE1804AA9ABC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FAULKNER, CLAUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 WHITMAN DR.
 City WILMINGTON State DE Zip Code 19808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 21 / 2021
Transaction ID : AF13F237D68EB4771B4A
 Amount of Each Receipt this Period 25.00
 Memo Item

C. FAULKNER, CLAUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2614 WHITMAN DR.
 City WILMINGTON State DE Zip Code 19808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A39EC2E322C95443F99A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 604 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAUST, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 VINCENT AVE

City METAIRIE	State LA	Zip Code 70005
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2021

Transaction ID : A84869156F44B4A8A8EA

Amount of Each Receipt this Period
100.00

Memo Item

B. FAUST, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 VINCENT AVE

City METAIRIE	State LA	Zip Code 70005
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2021

Transaction ID : A49E53AC1AE49453EB5C

Amount of Each Receipt this Period
100.00

Memo Item

C. FAUST, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 320 VINCENT AVE

City METAIRIE	State LA	Zip Code 70005
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2021

Transaction ID : A42970AC3891E4F3DA3B

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 605 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAUST, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 VINCENT AVE
 City METAIRIE State LA Zip Code 70005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A325CC29F9CE442068B0
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FAY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 TUPELO GLEN CT
 City FUQUAY VARINA State NC Zip Code 27526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : AD72A984FBBD34342AC7
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FAZZIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57-40 64TH STREET PVT
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A15B6ECB1A5444CD8AF7
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 606 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAZZIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57-40 64TH STREET
 PVT
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A6B0E67705D1D47B7815
 Amount of Each Receipt this Period 75.00
 Memo Item

B. FAZZIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57-40 64TH STREET
 PVT
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 03 / 2021
Transaction ID : A1ECFB37B7DCB40E4B80
 Amount of Each Receipt this Period 35.00
 Memo Item

C. FAZZIO, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57-40 64TH STREET
 PVT
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A4188CA010DF14216B19
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 607 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FAZZIO, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 57-40 64TH STREET
PVT

City MASPETH	State NY	Zip Code 11378
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : A9ECBA728D93C47A0AAC

Amount of Each Receipt this Period
35.00

Memo Item

B. FAZZIO, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5740 64TH STREET
PVT

City MASPETH	State NY	Zip Code 11378
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A9DE11A54E65445428B1

Amount of Each Receipt this Period
35.00

Memo Item

C. FAZZIO, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5740 64TH STREET
PVT

City MASPETH	State NY	Zip Code 11378
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : AEAFO63C8F1FA4087A06

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 608 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FAZZIO, FRANK, , ,

Mailing Address 5740 64TH STREET
PVT

City MASPETH	State NY	Zip Code 11378
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A1C4FD2B8215741F99C7

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FEDER, GEORGE, , ,

Mailing Address 2250 AUBURN RAVINE DRIVE

City LINCOLN CALIFORNIA	State CA	Zip Code 95648
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A92EAFFA914BF4A76A2B

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FEDER, GEORGE, , ,

Mailing Address 2250 AUBURN RAVINE DRIVE

City LINCOLN CALIFORNIA	State CA	Zip Code 95648
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : ACF8CDA6F358B488A94F

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 609 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FEDER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 AUBURN RAVINE DRIVE
 City LINCOLN CALIFORNIA State CA Zip Code 95648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 19 / 2021
Transaction ID : AC62DC6CD39C24C22AC5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FEDER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 AUBURN RAVINE DRIVE
 City LINCOLN CALIFORNIA State CA Zip Code 95648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2021
Transaction ID : ADE53D320FC554202B48
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FEDER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 AUBURN RAVINE DRIVE
 City LINCOLN CALIFORNIA State CA Zip Code 95648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 19 / 2021
Transaction ID : ADF4E1A97171940BD8F9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 610 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FEDER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2250 AUBURN RAVINE DRIVE

City LINCOLN CALIFORNIA	State CA	Zip Code 95648
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2021

Transaction ID : AA62D06043B7C4D4ABCE

Amount of Each Receipt this Period
50.00

Memo Item

B. FEDER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2250 AUBURN RAVINE DRIVE

City LINCOLN CALIFORNIA	State CA	Zip Code 95648
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : A7D40CB30995F425E938

Amount of Each Receipt this Period
50.00

Memo Item

C. FEDER, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2250 AUBURN RAVINE DRIVE

City LINCOLN CALIFORNIA	State CA	Zip Code 95648
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : ABCF34C7ECA824DEE85C

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 611 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FEDYNA, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 MAIN ST.
 City SOUTHPORT State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : A38278250565544D6805
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FEDYNA, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 MAIN ST.
 City SOUTHPORT State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : AB02211D5B4CF4DCDBEC
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. FEDYNA, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 MAIN ST.
 City SOUTHPORT State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : AEBFC749FEB014D25A43
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 612 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FEDYNA, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 MAIN ST.
 City SOUTHPORT State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A0B2382098BC44D76832
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FEDYNA, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 MAIN ST.
 City SOUTHPORT State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A42A46AD405C94BF3A42
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. FEENEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8322 GREENVIEW DR
 City ROME State NY Zip Code 13440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A25B58B698B37431ABD8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 613 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FEENEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8322 GREENVIEW DR
 City ROME State NY Zip Code 13440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A5EC659B4D8D349C8B1A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FEFFER, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17519 N 97TH PL
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRODEGE, LLC Occupation (for Individual) REVENUE OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 09 / 2021
Transaction ID : ABCB1D46D8CA842DDAC:
 Amount of Each Receipt this Period 150.00
 Memo Item

C. FEFFER, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17519 N 97TH PL
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRODEGE, LLC Occupation (for Individual) REVENUE OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 09 / 2021
Transaction ID : A526A7EA9FDAC4B80872
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 614 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FEFFER, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17519 N 97TH PL
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRODEGE, LLC Occupation (for Individual) REVENUE OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 09 / 2021
Transaction ID : AEC3062D8E99F4FFEBEE
 Amount of Each Receipt this Period 150.00
 Memo Item

B. FEFFER, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17519 N 97TH PL
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRODEGE, LLC Occupation (for Individual) REVENUE OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A669FFF34ACA34266BC3
 Amount of Each Receipt this Period 150.00
 Memo Item

C. FELDMAN, DMITRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14619 48TH PL W
 City EDMONDS State WA Zip Code 98026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROVIDENCE ST JOSEPH HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A32FFD99738174408A75
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 615 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FELDMAN, DMITRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14619 48TH PL W
 City EDMONDS State WA Zip Code 98026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROVIDENCE ST JOSEPH HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A47821569188A4FD2AB9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FELDT, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 BRIARWOOD
 City SULPHUR SPRINGS State TX Zip Code 75482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AF92E0029FD144BD6802
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FELDT, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 BRIARWOOD
 City SULPHUR SPRINGS State TX Zip Code 75482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A4EC1F78A9FAF4F2BB1D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 616 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FELLER, KAYE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36106 SECRET GARDEN PATH N

City SAN TAN VALLEY	State AZ	Zip Code 85140
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2021

Transaction ID : A4E933DC5FFBF4D5EBF8

Amount of Each Receipt this Period
35.00

Memo Item

B. FENSTERMACHER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 605 BLICK DR

City SILVER SPRING	State MD	Zip Code 20904
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2021

Transaction ID : A1736678BA6CC410782E

Amount of Each Receipt this Period
100.00

Memo Item

C. FENSTERMACHER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 605 BLICK DR

City SILVER SPRING	State MD	Zip Code 20904
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2021

Transaction ID : ABCA4E32F597347198C9

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 617 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FENSTERMACHER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 BLICK DR
 City SILVER SPRING State MD Zip Code 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A0FD7724A8B7A4253A3B
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FENSTERMACHER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 605 BLICK DR
 City SILVER SPRING State MD Zip Code 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A9359401B37194F6E97E
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. FERCHO, RUBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 STONEBRIDGE DR.
 City CHICO State CA Zip Code 95973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A31A8A625356142B1943
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 618 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FERCHO, RUBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 STONEBRIDGE DR.
 City CHICO State CA Zip Code 95973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 23 / 2021
Transaction ID : A44D6597511D742F8A1E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FEREGA, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6817 WHITE PINE TRAIL
 City DARIEN State IL Zip Code 60561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 06 / 14 / 2021
Transaction ID : A202DF4A47914497D88C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. FERNANDEZ, MARTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 BILTMORE WAY APT 505
 City MIAMI State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 01 / 05 / 2021
Transaction ID : A3069CDDA45134570A2A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 619 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FERNANDEZ, MARTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 BILTMORE WAY
 APT 505
 City MIAMI State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : A1DC711FAF5A7457DA31
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FERN, LENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 MILL RIDGE ROAD
 City LEXINGTON State KY Zip Code 40514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : A630C024AF5434AC992D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. FERRARINI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1571 HILLSIDE DR. SE
 City ISSAQUAH State WA Zip Code 98027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : AEF527082ABAB474DB25
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 620 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FERRARINI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1571 HILLSIDE DR. SE
 City ISSAQUAH State WA Zip Code 98027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A4FE8A19FF98E43D2813
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FERRARINI, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1571 HILLSIDE DR. SE
 City ISSAQUAH State WA Zip Code 98027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A482431FF3D3B465CAF1
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FERRER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8465 NW 166 TERR
 City HIALEAH State FL Zip Code 33016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARING PROFESSIONAL SERVICES, INC. Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : AA5039C50C0724B41984
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 621 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FETSCHER, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1271 REDEEMER DR.

City HANAHAN	State SC	Zip Code 29410
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2021

Transaction ID : AC9D84C46E5754AE28C2

Amount of Each Receipt this Period
50.00

Memo Item

B. FETSCHER, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1271 REDEEMER DR.

City HANAHAN	State SC	Zip Code 29410
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2021

Transaction ID : A708B439BD33145359FD

Amount of Each Receipt this Period
50.00

Memo Item

C. FIALA, KIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1106 RAMMERS AVE

City LOUISVILLE	State KY	Zip Code 40204
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE APPRAISAL GROUP, LLC	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2021

Transaction ID : AC740777FAE2D428CAB6

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 622 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIALA, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 RAMMERS AVE
 City LOUISVILLE State KY Zip Code 40204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE APPRAISAL GROUP, LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : ABAF8E1F0CF9447F1A89
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FIELD, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 RIDGE RD
 City BARRINGTON State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL WEB PRESS Occupation (for Individual) PRINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2021
Transaction ID : ACFBB51C17CE449D3B94
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FIELD, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 RIDGE RD
 City BARRINGTON State IL Zip Code 60010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL WEB PRESS Occupation (for Individual) PRINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A5743EB76DA104A8587B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 623 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIELD, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 RIDGE RD

City BARRINGTON	State IL	Zip Code 60010
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTINENTAL WEB PRESS	Occupation (for Individual) PRINTER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A4A47C9BC072743BABB4

Amount of Each Receipt this Period
100.00

Memo Item

B. FIELD, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 RIDGE RD

City BARRINGTON	State IL	Zip Code 60010
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTINENTAL WEB PRESS	Occupation (for Individual) PRINTER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : AA1DBE5FBBDDC47FBB5I

Amount of Each Receipt this Period
100.00

Memo Item

C. FIELDMAN, JB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LANE

City ROSLYN HEIGHTS	State NY	Zip Code 11577
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) MD
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2021

Transaction ID : AE42D07348E8741FD9DA

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 624 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021
Transaction ID : A48533B9F3AA34B98BD5
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2021
Transaction ID : A19B6798C2C794A5BAA3
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A9EF20249D60F438EB49
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 625 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **05 / 20 / 2021**
Transaction ID : A17F09365A6A242D09A0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : A4529195026C74BF4AEA
 Amount of Each Receipt this Period 25.00
 Memo Item

C. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **06 / 20 / 2021**
Transaction ID : ABDE4D562CF6C4A69BE0
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

125.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 626 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A1D1C39EB07934E7BA46
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A3A6058B12EB04C98AFE
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AF89484ECB72D4F54BD8
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 627 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : ACD3D00762B74D11AC0
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : AF59B4E7B981A4D7CAF5
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A663CC7D6530845008DC
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 628 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : AB5B4F716B31A40A3A10
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : AC59EEA5E82064287A90
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FIELDS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 464 FRASIER STREET
 City MARIETTA State GA Zip Code 30060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A3436BFE951794DA6B21
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 629 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIELDS, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 464 FRASIER STREET

City MARIETTA	State GA	Zip Code 30060
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : A269323474C3645E7BCB

Amount of Each Receipt this Period
50.00

Memo Item

B. FILE, MATHEW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9340 QUARRY ROAD

City COLONA	State IL	Zip Code 61241
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPEED/FLOYD AUTO COLLISION REPAIR	Occupation (for Individual) AUTO PAINTER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2021

Transaction ID : A554DCAE7F2E047BBBC5

Amount of Each Receipt this Period
50.00

Memo Item

C. FILE, MATHEW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9340 QUARRY ROAD

City COLONA	State IL	Zip Code 61241
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPEED/FLOYD AUTO COLLISION REPAIR	Occupation (for Individual) AUTO PAINTER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : A73D816389D6F42A7A9E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 630 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FINAN, PATTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15532 MILLOIT LN S
 City COVINGTON State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A274A6DDF431841EAAC4
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FINAN, PATTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15532 MILLOIT LN S
 City COVINGTON State LA Zip Code 70433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AB2D07476944B4BA4914
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FINCHER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1021 50TH ST SOUTH
 City BIRMINGHAM State AL Zip Code 35222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A679265C2946540699F6
 Amount of Each Receipt this Period
 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 631 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FINCH, PATRICIA, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 WOLF RIDGE DRIVE
 City HOLLAND State OH Zip Code 43528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AEA23121BAA5E4BC0AC
 Amount of Each Receipt this Period 25.00
 Memo Item

B. FINE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2644 MICAH RD
 City NORTH POLE State AK Zip Code 99705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A11313EC16BCE429FA14
 Amount of Each Receipt this Period 35.00
 Memo Item

C. FINN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 LYNCH DRIVE
 City HOLYOKE State MA Zip Code 01040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 216.25

Date of Receipt 04 / 21 / 2021
Transaction ID : A01BE9787F99D4B1CA3E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 632 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FINN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 LYNCH DRIVE
 City HOLYOKE State MA Zip Code 01040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : AE6A0CC1310DE445EB0E
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FINN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 LYNCH DRIVE
 City HOLYOKE State MA Zip Code 01040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : A6705081499C540A696B
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. FINN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 LYNCH DRIVE
 City HOLYOKE State MA Zip Code 01040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 291.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AB01A5508E40844A3BEB
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 633 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FINN, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 LYNCH DRIVE
 City HOLYOKE State MA Zip Code 01040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.25

Date of Receipt 06 / 21 / 2021
Transaction ID : A35A62A9FD1364A3FB7B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. FINNERTY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 CALIFORNIA DR. SECTION C
 City YOUNTVILLE State CA Zip Code 94599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 09 / 2021
Transaction ID : AFA10CC355F0B44F2BA7
 Amount of Each Receipt this Period 10.00
 Memo Item

C. FINNERTY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 CALIFORNIA DR. SECTION C
 City YOUNTVILLE State CA Zip Code 94599
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A2CAC8B5FC6E34C99BCB
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 634 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 01 / 12 / 2021
Transaction ID : AFE42813BCB3B48B6B93
 Amount of Each Receipt this Period 25.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 01 / 15 / 2021
Transaction ID : AEC774D356F354508AA9
 Amount of Each Receipt this Period 25.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 01 / 19 / 2021
Transaction ID : A469EF1EC36654D1FA74
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 635 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2021
Transaction ID : A5B3E4F2EA515426D8BE
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2021
Transaction ID : AAAD5B4D9E5164A1B8F2
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2021
Transaction ID : AC7A8ECC7D9984710AC5
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 636 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A495343CE5A5A4AC2BE9
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : AC368347F4CEC4CE6899
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2021
Transaction ID : A0E95CB7E975446D1A62
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 637 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2021
Transaction ID : A1F22997E14D74EFDBC7
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2021
Transaction ID : A94D93B541DAE4461959
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2021
Transaction ID : AB877FFBFE7C243E9B51
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 638 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2021
Transaction ID : A60393E0384894655873
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2021
Transaction ID : A2053B8A2EF4B4E82B7A
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2021
Transaction ID : ADBD0BCE8D5E54F6BA1F
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 639 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2021
Transaction ID : A0D751E1E8D6440CBB2C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : A56D391B4B3A1472F84D
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A48AA931027C34F2894F
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 640 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
785.00

Date of Receipt
03 / 03 / 2021
Transaction ID : A2877698B3C504F78893

Amount of Each Receipt this Period
25.00

Memo Item

B. FIOR, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
820.00

Date of Receipt
03 / 05 / 2021
Transaction ID : A59A34217875C402FBD0

Amount of Each Receipt this Period
35.00

Memo Item

C. FIOR, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
845.00

Date of Receipt
03 / 07 / 2021
Transaction ID : A609DF65B310B4DA1ACA

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 641 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : A364D3339A61241ADAB1
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : A381A15785F544405AAA
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 930.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : AE7238A899994478EA43
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 642 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 965.00

Date of Receipt
 03 / 19 / 2021
Transaction ID : AF58D175D98FF44BFAEE
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 03 / 24 / 2021
Transaction ID : A03E088A2E0D642D3B52
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FIOR, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 1ST STREET
 502
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 03 / 25 / 2021
Transaction ID : ACC44897AC0D9463989C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 643 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIRESTONE, JOSEPH, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 344
 City JARVISBURG State NC Zip Code 27947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUILDING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A57B9C3ACDDD0433FABC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FIRESTONE, JOSEPH, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 344
 City JARVISBURG State NC Zip Code 27947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUILDING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A81B2CE173BEA4753AEE
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FIRESTONE, JOSEPH, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 344
 City JARVISBURG State NC Zip Code 27947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUILDING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 24 / 2021
Transaction ID : ABF74CC847B14433EACB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 644 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIRESTONE, JOSEPH, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 344
 City JARVISBURG State NC Zip Code 27947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUILDING CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A2216D2515AA24679A4A
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FISCHER, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 WIDGEON DRIVE
 City HAMPSTEAD State NC Zip Code 28443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AFFBDA7F244DD49B0835
 Amount of Each Receipt this Period 35.00
 Memo Item

C. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2021
Transaction ID : AB25EB420A2E345028F8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 645 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : A1E740C9852DF4B9BBEF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 06 / 2021**
Transaction ID : AA5375FDDE22D4065878
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : A004F126144C4460D8CC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 646 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 06 / 2021
Transaction ID : AA314849CA2E841D9977
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2021
Transaction ID : ACEB18DB8FB7A44698F2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AC777CEBA5D844B8A95E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 647 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FITZPATRICK, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 LITTLE COUNTRY ROAD
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A4EBAC9B0CE2D4359B85
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FITZSIMMONS, CHRISTIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 GREEN DOLPHIN DRIVE
 City PLACIDA State FL Zip Code 33946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USEPPA ISLAND CLUB Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A72937BF1FC5C4113912
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FITZSIMMONS, CHRISTIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 GREEN DOLPHIN DRIVE
 City PLACIDA State FL Zip Code 33946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USEPPA ISLAND CLUB Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A88A9A32EBD3C4F0EB7F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 648 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLAKNE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 PARKVIEW LN
 City COLOGNE State MN Zip Code 55322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLAKNES EXTERIOR DESIGN/SCAPE CO Occupation (for Individual) LANDSCAPE DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : A74C640D789754496AB9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FLAKNE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 PARKVIEW LN
 City COLOGNE State MN Zip Code 55322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLAKNES EXTERIOR DESIGN/SCAPE CO Occupation (for Individual) LANDSCAPE DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A64493EA736F742888D3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FLANAGAN, SUSAN, L, DR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 APPLGATE SCHOOL RD
 City APPLGATE State CA Zip Code 95703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 12 / 2021**
Transaction ID : A5CBD65CBFFA14193834
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 649 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLANAGAN, SUSAN, L, DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 APPLGATE SCHOOL RD

City APPLGATE	State CA	Zip Code 95703
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2021

Transaction ID : A6458E12F38F8421BA16

Amount of Each Receipt this Period
50.00

Memo Item

B. FLANAGAN, SUSAN, L, DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 APPLGATE SCHOOL RD

City APPLGATE	State CA	Zip Code 95703
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2021

Transaction ID : ADE9E0E79E98D48D09C8

Amount of Each Receipt this Period
50.00

Memo Item

C. FLEET, MICHELE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 932 PINE HILL RD

City LITITZ	State PA	Zip Code 17543
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2021

Transaction ID : AE612B2D3A63B422F962

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 650 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLEGENHEIMER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 LEMONWOOD DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 28 / 2021
Transaction ID : AA997FCC43DF24026A80
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FLEGENHEIMER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 LEMONWOOD DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 28 / 2021
Transaction ID : ACE3C9B22D9F24E02AB3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FLEGENHEIMER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 LEMONWOOD DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 12 / 2021
Transaction ID : AF8FAD92A34904A7F8E5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 651 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : A1C1A48B13F4745CC8E8

Amount of Each Receipt this Period
50.00

Memo Item

B. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2021

Transaction ID : A2CA1188D6B60474FAE6

Amount of Each Receipt this Period
50.00

Memo Item

C. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

Transaction ID : A6370594D61DF4514ABF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 652 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2021

Transaction ID : A23E5877F91D84534B3F

Amount of Each Receipt this Period
50.00

Memo Item

B. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2021

Transaction ID : A330774390AB64CE9B66

Amount of Each Receipt this Period
50.00

Memo Item

C. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2021

Transaction ID : A1DB140ED111449A69A9

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 653 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : AB2959DA55BC04774BEC

Amount of Each Receipt this Period
50.00

Memo Item

B. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : AB09857AFD4C345189FC

Amount of Each Receipt this Period
50.00

Memo Item

C. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2021

Transaction ID : A263C0FB32F8D43E68AF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 654 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : A61D58FA0FD1A46E4B2B

Amount of Each Receipt this Period
50.00

Memo Item

B. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : AA0DE3E440F75486FA5F

Amount of Each Receipt this Period
50.00

Memo Item

C. FLEISCHMAN, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7448 SILVER WOODS CT.

City BOCA RATON	State FL	Zip Code 33433
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GSI INC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2021

Transaction ID : AC27C53F849C549E29F5

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 655 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLEIS, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1806 DONEGAL DRIVE

City MELBOURNE	State FL	Zip Code 32940
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLEIS ENGINEERING AND CONSULTING, LLC	Occupation (for Individual) CIVIL ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2021

Transaction ID : A7999C3CE456E460BA1B

Amount of Each Receipt this Period
100.00

Memo Item

B. FLEIS, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1806 DONEGAL DRIVE

City MELBOURNE	State FL	Zip Code 32940
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLEIS ENGINEERING AND CONSULTING, LLC	Occupation (for Individual) CIVIL ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2021

Transaction ID : A1C19063B3C78499EB00

Amount of Each Receipt this Period
100.00

Memo Item

C. FLEIS, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1806 DONEGAL DRIVE

City MELBOURNE	State FL	Zip Code 32940
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FLEIS ENGINEERING AND CONSULTING, LLC	Occupation (for Individual) CIVIL ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : A6F12C6434516445A845

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 656 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLEIS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 DONEGAL DRIVE
 City MELBOURNE State FL Zip Code 32940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLEIS ENGINEERING AND CONSULTING, LLC Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A6C75EE5B63E9454FA5B
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FLOOD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 E TROPICAL WAY
 City PLANTATION State FL Zip Code 33317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A19C0100713804C199E9
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FLORES, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19221 TAFT AVE
 City VILLA PARK State CA Zip Code 92861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A83A43388DD604119940
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 657 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLORES, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19221 TAFT AVE
 City VILLA PARK State CA Zip Code 92861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A47C53D7EC5BA41F9903
 Amount of Each Receipt this Period 100.00
 Memo Item

B. FLORES, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19221 TAFT AVE
 City VILLA PARK State CA Zip Code 92861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A9616B674F8BF4B74A1A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FLORES, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19221 TAFT AVE
 City VILLA PARK State CA Zip Code 92861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A6D01F2CBB9C64CD182B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 658 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLORIANO DEDOMENICO, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7620 260TH AVE NE

City REDMOND	State WA	Zip Code 98053
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021

Transaction ID : AE5831D01C96649B8865

Amount of Each Receipt this Period
 100.00

Memo Item

B. FLORIANO DEDOMENICO, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7620 260TH AVE NE

City REDMOND	State WA	Zip Code 98053
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021

Transaction ID : AE43AC98B9686406DADE

Amount of Each Receipt this Period
 100.00

Memo Item

C. FLYNN, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 CHOCTAW ST.

City JOHNSON CITY	State TN	Zip Code 37604
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WASHINGTON COUNTY BOARD OF EDUCATION	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021

Transaction ID : A575B95FEE9B34EC5B79

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 659 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FOLGER, ALONZO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3580 SHAW AVE
 352
 City CINCINNATI State OH Zip Code 45208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : AEA060AF2E4414F8F92B
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FOLGER, WILIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 WINNERS CIR
 City RED LION State PA Zip Code 17356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AC281DF7DF6434CCC905
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FONTAINE-CALKINS, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 LANYARD LANE
 City WATERFORD State CT Zip Code 06385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDA GRAPHICS, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : AB0B22B82717F4B6EA69
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 660 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FONTAINE-CALKINS, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 LANYARD LANE

City WATERFORD	State CT	Zip Code 06385
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIDA GRAPHICS, INC.	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2021

Transaction ID : A607DE5BF7BD945DF881

Amount of Each Receipt this Period
100.00

Memo Item

B. FONTAINE-CALKINS, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 LANYARD LANE

City WATERFORD	State CT	Zip Code 06385
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIDA GRAPHICS, INC.	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2021

Transaction ID : A0A0D7C8E2410497E955

Amount of Each Receipt this Period
100.00

Memo Item

C. FONTAINE-CALKINS, MICHELLE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 LANYARD LANE

City WATERFORD	State CT	Zip Code 06385
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIDA GRAPHICS, INC.	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : A05FD11AF31E94C21B72

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 661 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FONTENOT, KRISTI, , ,

Mailing Address 330 PARAGON WAY

City CASTLE ROCK	State CO	Zip Code 80108
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2021

Transaction ID : A1C665CD790C04768BD8

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FONTENOT, KRISTI, , ,

Mailing Address 330 PARAGON WAY

City CASTLE ROCK	State CO	Zip Code 80108
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2021

Transaction ID : A9048AABB7E674981A32

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FONTENOT, KRISTI, , ,

Mailing Address 330 PARAGON WAY

City CASTLE ROCK	State CO	Zip Code 80108
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : A40B4293C4F34484EAE9

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 662 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FONTENOT, KRISTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 PARAGON WAY
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A24A69B3FA8E3467B818
 Amount of Each Receipt this Period 35.00
 Memo Item

B. FORCIER, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 BALTUSROL DRIVE
 City APTOS State CA Zip Code 95003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : AAB46A70CF8B044F9BD4
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FORCIER, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 BALTUSROL DRIVE
 City APTOS State CA Zip Code 95003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A078BDD2EE3094FFBA48
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 663 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FORD, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 85

City EASTLAKE WEIR	State FL	Zip Code 32133
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		13		2021

Transaction ID : AC39B5D4CBD814F4BA4A

Amount of Each Receipt this Period
50.00

Memo Item

B. FORD, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 85

City EASTLAKE WEIR	State FL	Zip Code 32133
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		06		2021

Transaction ID : A926FA731792A4C79ABC

Amount of Each Receipt this Period
10.00

Memo Item

C. FORD, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 85

City EASTLAKE WEIR	State FL	Zip Code 32133
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		13		2021

Transaction ID : A1871D6BCC9F3431996F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 664 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FORD, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 85
 City EASTLAKE WEIR State FL Zip Code 32133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A6579B2BCB60A4152BBF
 Amount of Each Receipt this Period 10.00
 Memo Item

B. FORD, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 85
 City EASTLAKE WEIR State FL Zip Code 32133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A22BBA3C468D9431B830
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FORDHAM, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 241622
 City MONTGOMERY State AL Zip Code 36124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARC REALTY Occupation (for Individual) REAL ESTATE SALES AND INVESTME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A90F504BAFA1E418E8CC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 665 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FORMBY, EMMETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1113 OAK LEAF CT
 City FORT COLLINS State CO Zip Code 80525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A36C22EDC57ED4B4BB8E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FORTMULLER, GEORGE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10758 SW VISCONTI WAY
 City PORT SAINT LUCIE State FL Zip Code 34986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A9A6F024D771D4636B8F
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FORTSON, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5106 BROOKMEADE DR
 City HOUSTON State TX Zip Code 77045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REESE NURSING SERVICE 51 Occupation (for Individual) PDN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A295B70C99DF1406C97C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 666 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FORTSON, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5106 BROOKMEADE DR

City HOUSTON	State TX	Zip Code 77045
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REESE NURSING SERVICE 51	Occupation (for Individual) PDN
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : A387FCCCB49E94603B6A

Amount of Each Receipt this Period
50.00

Memo Item

B. FORTSON, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5106 BROOKMEADE DR

City HOUSTON	State TX	Zip Code 77045
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) REESE NURSING SERVICE 51	Occupation (for Individual) PDN
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : AB2797EB74A2941F9B38

Amount of Each Receipt this Period
50.00

Memo Item

C. FOSTER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4309 DERRICK CV

City SPICEWOOD	State TX	Zip Code 78669
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A4E5A7FF5D7CC4C9BA2C

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 667 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FOURNIER, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 PINNACLE ROCK RD
 City STAMFORD State CT Zip Code 06903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 12 / 2021
Transaction ID : A6770D5F58A1C4910977
 Amount of Each Receipt this Period 25.00
 Memo Item

B. FOURNIER, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 PINNACLE ROCK RD
 City STAMFORD State CT Zip Code 06903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2021
Transaction ID : AD164619CD6C04CDF826
 Amount of Each Receipt this Period 25.00
 Memo Item

C. FOURNIER, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 PINNACLE ROCK RD
 City STAMFORD State CT Zip Code 06903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A92C5CFF5489C44AE852
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 668 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FOURNIER, GENEVIEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64 PINNACLE ROCK RD
 City STAMFORD State CT Zip Code 06903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AC7FA15F2CA55487CA0E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. FOWLER, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 SAN LUIS WAY
 City NOVATO State CA Zip Code 94945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 27 / 2021
Transaction ID : AAFA88809AE0D469AB24
 Amount of Each Receipt this Period 35.00
 Memo Item

C. FOX, DAVID, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 N TULLY ROAD SPACE 47
 City TURLOCK State CA Zip Code 95380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 21 / 2021
Transaction ID : A0CE074A689544A27956
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 669 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FOX, DAVID, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 N TULLY ROAD
 SPACE 47
 City TURLOCK State CA Zip Code 95380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A3054CBF391FA4523A37
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. FOX, DAVID, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 N TULLY ROAD
 SPACE 47
 City TURLOCK State CA Zip Code 95380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : A4BA5FDFA4387472E8CE
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FOX, DAVID, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 N TULLY ROAD
 SPACE 47
 City TURLOCK State CA Zip Code 95380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : AE013A42FDD6241CC9C6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 670 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FOX, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 WILLOW LAKE DR
 City PORTLAND State TN Zip Code 37148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A5369BEF77922471A9AA
 Amount of Each Receipt this Period 35.00
 Memo Item

B. FOY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 76 KNOTTS RD
 City AURORA State WV Zip Code 26705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 05 / 2021
Transaction ID : A8AA357AC78C74EA9BCB
 Amount of Each Receipt this Period 500.00
 Memo Item

C. FRANCESCO, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1471 2ND AVE 1
 City NEW YORK State NY Zip Code 10075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) 1477 SECOND CORP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2021
Transaction ID : AF1B16AE1ACA0495F944
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	635.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 671 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRANCESCO, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1471 2ND AVE
 1
 City NEW YORK State NY Zip Code 10075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) 1477 SECOND CORP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A7F5ADF2FD3E44E48992
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FRANCIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 ST CHARLES AVE
 2D
 City NEW ORLEANS State LA Zip Code 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOTELIER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021
Transaction ID : AD4F5077135D64F2DB84
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FRANCIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 ST CHARLES AVE
 2D
 City NEW ORLEANS State LA Zip Code 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOTELIER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : AE69B260B6A65483A9E0
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 672 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRANCIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 ST CHARLES AVE
 2D
 City NEW ORLEANS State LA Zip Code 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOTELIER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 16 / 2021
Transaction ID : AAA0F909EEF0E4BBE9CE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FRANCIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 ST CHARLES AVE
 2D
 City NEW ORLEANS State LA Zip Code 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOTELIER
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A7CA6E86F7FE54B00A80
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FRANCIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 ST CHARLES AVE
 2D
 City NEW ORLEANS State LA Zip Code 70130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HOTELIER
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A78890E57B55B4AA8A5D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FRANK, ANN, MARIE, ,

Mailing Address 3311 RAINTREE AVE

City TORRANCE	State CA	Zip Code 90505
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORRANCE UNIFIED SCHOOL DISTRICT	Occupation (for Individual) TEACHER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021

Transaction ID : A0F83EC413E09444A850

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FRANKE, FREDERICK, , ,

Mailing Address 517 CEDAR TRAIL

City NEW BRAUNFELS	State TX	Zip Code 78130
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) DDS
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021

Transaction ID : A14DB2FED6FAC431395E

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FRANKE, FREDERICK, , ,

Mailing Address 517 CEDAR TRAIL

City NEW BRAUNFELS	State TX	Zip Code 78130
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) DDS
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021

Transaction ID : ADE584AED6CAF4E05BDE

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 674 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 14 / 2021
Transaction ID : AAA00D3EA6C1D4CBCBF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A56A1A659B8D54C29B8D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AD59D74ED76C94E2FA68
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 675 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AA86DF93C624B4C9CAB7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A6CD54A07609F43B8BEF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A64882B96057F49DA82F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 676 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : AB93656C08FF34E03B3C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FRANKE, FREDERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 CEDAR TRAIL
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A6ABDCB0C33D04ACFAE1
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FRANKLIN, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 SAN PEDRO AVE SUITE 404
 City SAN ANTONIO State TX Zip Code 78216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 04 / 2021
Transaction ID : A8B8850AE13FE4729A33
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 677 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRANKLIN, MYLES, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94 BELMONT PARK RD
 City BREWSTER State MA Zip Code 02631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : A05334AE61F7741A6BA1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FRANKS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25841 PRAIRIESTONE DR.
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A6A0A1F9F58564B2894A
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FRANKS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25841 PRAIRIESTONE DR.
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A3B74877461C644D1B17
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 678 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRASER, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20925 SNAG ISLAND DRIVE E
 City BONNEY LAKE State WA Zip Code 98391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOHN L. SCOTT Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : AF2F617FFC6AB4B40A4B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. FRASHRI, PAQSOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 HACKBERRY PL
 City CLIFTON State NJ Zip Code 07013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : A0D266399FD8F4340B36
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FRASHRI, PAQSOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 HACKBERRY PL
 City CLIFTON State NJ Zip Code 07013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 25 / 2021**
Transaction ID : AB01D91EB7F844C4EB06
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 679 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRASSETTO, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23105 SE BORGES RD
 City DAMASCUS State OR Zip Code 97089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LONGARM PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A9578694260584893B22
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FRASSETTO, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23105 SE BORGES RD
 City DAMASCUS State OR Zip Code 97089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LONGARM PROFESSIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AB5D993F505484B48BC6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FRAZEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 EAST CEDAR
 City HILL CITY State KS Zip Code 67642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AECOM Occupation (for Individual) ENGINEERING TECH AND GUNSMITH-
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A22BA8EC0EC2D4BC596D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 680 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRAZEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 EAST CEDAR
 City HILL CITY State KS Zip Code 67642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AECOM Occupation (for Individual) ENGINEERING TECH AND GUNSMITH
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : ABA8423FCFF3B417DBDF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FRAZIER, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 SANTO YSIDRO RD
 City SANTA TERESA State NM Zip Code 88008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 04 / 13 / 2021
Transaction ID : A3C53C1A02E6A4D5FB36
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FRAZIER, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 SANTO YSIDRO RD
 City SANTA TERESA State NM Zip Code 88008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 05 / 13 / 2021
Transaction ID : AE34D3EAD4E1949819C3
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 681 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRAZIER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1210 12TH STREET
 BOX 1130
 City BOCA GRANDE State FL Zip Code 33921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AFE8E78B394074A52BC4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FRAZIER, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 24
 City RIO FRIO State TX Zip Code 78879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRAZIER DOZER AND CONSTRUCTION Occupation (for Individual) SELF EMPLOYED (HEAVY EQUIPME)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AD8A1657C82094C7AB48
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FRAZIER, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 24
 City RIO FRIO State TX Zip Code 78879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRAZIER DOZER AND CONSTRUCTION Occupation (for Individual) SELF EMPLOYED (HEAVY EQUIPMEN)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A7C58739001594358A42
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 682 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRAZIER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10305 SHREWSBURY RUN WEST
 City COLLIERVILLE State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : A81BFB59981BE401998D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FRAZIER, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10305 SHREWSBURY RUN WEST
 City COLLIERVILLE State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A4A0B7A1315F84856B6C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FREDERICK, DAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 PENN ST
 City EL SEGUNDO State CA Zip Code 90245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : AF17DE4341B4E4DE1ACD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 683 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FREEMAN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 8508
 City BACLIFF State TX Zip Code 77518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONE STAR STAINLESS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A7254A293AF2D4233B3B
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FREEMAN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 8508
 City BACLIFF State TX Zip Code 77518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONE STAR STAINLESS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AF6B2209F4954444FAE5
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FRENCH, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2424 CORBY DR
 City PLANO State TX Zip Code 75025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TELECOM TOWER GROUP, LLC Occupation (for Individual) EXECUTIVE MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A848B7896899341EAA4D
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 684 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRESH, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15810 51ST AVE N

City MINNEAPOLIS	State MN	Zip Code 55446
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHARTWELL FINANCIAL ADVISORY	Occupation (for Individual) CORPORATE FINANCE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2021

Transaction ID : A35B9697E54794DC28CE

Amount of Each Receipt this Period
35.00

Memo Item

B. FRIES, JUDY, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2705 LYDIA LN

City ROCKWALL	State TX	Zip Code 75087
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : AEC32C39446D346B9909

Amount of Each Receipt this Period
50.00

Memo Item

C. FRIES, JUDY, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2705 LYDIA LN

City ROCKWALL	State TX	Zip Code 75087
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : AE974E6EEE48C4FF680D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 685 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FROELKER, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4496 BIG CREEK RD
 City GERALD State MO Zip Code 63037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : AE6A57C719F1F4241A86
 Amount of Each Receipt this Period 250.00
 Memo Item

B. FRYER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4208 AIRPORT ROAD
 City CINCINNATI State OH Zip Code 45255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 23 / 2021**
Transaction ID : A2B46F19027AF4CF6B62
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 08 / 2021**
Transaction ID : ADE0CC60247094260AB9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 686 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2021

Transaction ID : AC7BE3F63499B4C11891

Amount of Each Receipt this Period
50.00

Memo Item

B. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2021

Transaction ID : A48F8DB15CAC24500B4A

Amount of Each Receipt this Period
50.00

Memo Item

C. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2021

Transaction ID : A18E2849FA24641D996A

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 687 OF 3012
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2021

Transaction ID : A3C59C253CE954E9D873

Amount of Each Receipt this Period
50.00

Memo Item

B. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2021

Transaction ID : A22BFB68767CF4AE582A

Amount of Each Receipt this Period
100.00

Memo Item

C. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2021

Transaction ID : A9917DEF33EBE4551B6F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 688 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AAE78F7515B3944BBB58
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : A2EBFBD7EE2474BD0B91
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : A7587A8CD41C3413E92D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 689 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2021

Transaction ID : ADB4C8D5990B94FB8BF6

Amount of Each Receipt this Period
50.00

Memo Item

B. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : A8B53495CEFA2426D839

Amount of Each Receipt this Period
50.00

Memo Item

C. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2021

Transaction ID : AC5E1A00BCB584A90B53

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 690 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2021

Transaction ID : AE64C3B4ECD7B41508AC

Amount of Each Receipt this Period
100.00

Memo Item

B. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : ABA4236DBFAC142EABD3

Amount of Each Receipt this Period
50.00

Memo Item

C. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : A0B659BF8B2784D7EB92

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 691 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A784EB234A4E843EAAE6
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021
Transaction ID : A2EFF890AC3F644A882A
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A85CB0C5AD2E24F07ACA
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 692 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AEEF80C70299B4CA597E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 02 / 2021
Transaction ID : ADF95D757D59E41C889D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. FULDNER, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5035 STONGATE CT
 City SPRINGFIELD State MO Zip Code 65809-4013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AA1A6F1E307D34D8AB1D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 693 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

Transaction ID : A2B3ADCFE74E64C3E88E

Amount of Each Receipt this Period
50.00

Memo Item

B. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

Transaction ID : A5D7B940B5CF74F95B30

Amount of Each Receipt this Period
50.00

Memo Item

C. FULDNER, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5035 STONGATE CT

City SPRINGFIELD	State MO	Zip Code 65809-4013
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : AFA7488F6F4754C5BBC0

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 694 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FULTZ, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1489 STATE HWY 121

City SULLIVAN	State IL	Zip Code 61951
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A7F9081CBAC924922AF0

Amount of Each Receipt this Period
 35.00

Memo Item

B. FUNK, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2479

City GARDNERVILLE	State NV	Zip Code 89410
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021
Transaction ID : A0464D0DBE6DE41DA967

Amount of Each Receipt this Period
 100.00

Memo Item

C. FUNK, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2479

City GARDNERVILLE	State NV	Zip Code 89410
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A7E9E6F8EE2FD4912895

Amount of Each Receipt this Period
 75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 695 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FURIN, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3113 HAZLEWOOD CT

City BEDFORD	State TX	Zip Code 76021
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRINITY TITLE OF TEXAS	Occupation (for Individual) ESCROW OFFICER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2021

Transaction ID : A8349ACB441DA423E8A7

Amount of Each Receipt this Period
50.00

Memo Item

B. FURIN, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3113 HAZLEWOOD CT

City BEDFORD	State TX	Zip Code 76021
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRINITY TITLE OF TEXAS	Occupation (for Individual) ESCROW OFFICER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2021

Transaction ID : A0838B928F3D843DFAEC

Amount of Each Receipt this Period
50.00

Memo Item

C. FURRER, ANNETTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34138 SHASTA DR

City LAKE ELSINORE	State CA	Zip Code 92532
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2021

Transaction ID : A26535B0AA17240F0828

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 696 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : AA434CB2AB5AA4594AB1
 Amount of Each Receipt this Period 25.00
 Memo Item

B. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : AE6734277660E4894874
 Amount of Each Receipt this Period 5.00
 Memo Item

C. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : AF5497D82CB7C45B282F
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 697 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 21 / 2021**
Transaction ID : A8A6D4074C2D94AB78BC
 Amount of Each Receipt this Period 25.00
 Memo Item

B. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A5A70DE6C69BC4AC2B75
 Amount of Each Receipt this Period 25.00
 Memo Item

C. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : AD3CBC6842316484B860
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 698 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AC1E6C113955D4F4B91B
 Amount of Each Receipt this Period 5.00
 Memo Item

B. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A1C5D651161F2441EAC7
 Amount of Each Receipt this Period 25.00
 Memo Item

C. FURRER, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34138 SHASTA DR
 City LAKE ELSINORE State CA Zip Code 92532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AC18B05869C924C999BA
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 699 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FUSILIER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44843 WHIT LOGGINS RD
 City HEMPSTEAD State TX Zip Code 77445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL GAS EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 16 / 2021**
Transaction ID : A8B3549A67DAA438A82B
 Amount of Each Receipt this Period 300.00
 Memo Item

B. GAETA, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 PLEASANT STREET PH510
 City WINTHROP State MA Zip Code 02152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 21 / 2021**
Transaction ID : A3342F7868F434D9C821
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GAFFNEY, HOPE, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 FERCROFT TOWER
 City DANVERS State MA Zip Code 01923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : AE1BDE963DC7F412FA29
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 700 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAFFNEY, HOPE, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 FERCROFT TOWER
 City DANVERS State MA Zip Code 01923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A35E31D9BB8274D0AA1F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GAGLIANO, KIMBERLY, L., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48390 HARBOR DR
 City CHESTERFIELD State MI Zip Code 48047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A695FF500D7F3444BB39
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GAGLIANO, KIMBERLY, L., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48390 HARBOR DR
 City CHESTERFIELD State MI Zip Code 48047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 22 / 2021
Transaction ID : AA8DD5F8FE4594009B5B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 701 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAGLIANO, KIMBERLY, L., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48390 HARBOR DR
 City CHESTERFIELD State MI Zip Code 48047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 22 / 2021**
Transaction ID : ABF30570CB8F94ECFAF1
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. GAINES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 ELDERWOOD DRIVE
 City PLEASANT HILL State CA Zip Code 94523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 09 / 2021**
Transaction ID : A6D8982382A1A41EEA5A
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. GAINES, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 ELDERWOOD DRIVE
 City PLEASANT HILL State CA Zip Code 94523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **06 / 09 / 2021**
Transaction ID : A2CE8C3FB2D6E4DC0A89
 Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 702 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 04 / 2021
Transaction ID : AB5CF4718B7454CA5A50
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 10 / 2021
Transaction ID : A3E8B3A71F4674E42A0C
 Amount of Each Receipt this Period 5.00
 Memo Item

C. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A50DE5F89152446718D5
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 703 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **04 / 04 / 2021**
Transaction ID : AE5542369F0C3450ABAF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : A8DF25425F490409FBA8
 Amount of Each Receipt this Period 5.00
 Memo Item

C. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A9AAC1B67A64F4C508D4
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 704 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A7736EE60C5444E6FBF4
 Amount of Each Receipt this Period 5.00
 Memo Item

B. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A5B4027DF44C4421EB2B
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AC8213AA04CC1424A906
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 705 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GALBRAITH, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5560 SHADY LANE
 City FLORENCE State OR Zip Code 97439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AE7EE7339C95E419895D
 Amount of Each Receipt this Period 25.00
 Memo Item

B. GALLAGHET, TRUDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 QUARTER MILE ROAD
 City ARMONK State NY Zip Code 10504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.25

Date of Receipt 05 / 31 / 2021
Transaction ID : AF7EFFFFE282704A65B55
 Amount of Each Receipt this Period 6.25
 Memo Item

C. GALLAGHET, TRUDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 QUARTER MILE ROAD
 City ARMONK State NY Zip Code 10504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.25

Date of Receipt 05 / 31 / 2021
Transaction ID : A24C8D2136D1247D0951
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	56.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 706 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GALLO, VINCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 288 MINER RD
 City CLEVELAND State OH Zip Code 44143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GALLO HEATING & AC Occupation (for Individual) HVAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 24 / 2021
Transaction ID : A825B98483BC14113825
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GALLOWAY, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4004 SOUTHERN OAKS DR UNIT 2
 City FAYETTEVILLE State NC Zip Code 28314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt
 03 / 25 / 2021
Transaction ID : AE6461257F6A94D41AD9
 Amount of Each Receipt this Period 150.00
 Memo Item

C. GAMACHE, MARIANNA, R., MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 435
 City SWANTON State VT Zip Code 05488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF VERMONT Occupation (for Individual) LEGISLATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 26 / 2021
Transaction ID : A9772462129614A21833
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 707 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAMACHE, MARIANNA, R., MRS.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 435

City SWANTON	State VT	Zip Code 05488
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF VERMONT	Occupation (for Individual) LEGISLATOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A5C19D5926701419788D

Amount of Each Receipt this Period
50.00

Memo Item

B. GAPULTOS, FILOMENO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 HIGH PINE DR.

City RUSSELLVILLE	State AL	Zip Code 35654
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A639AD3E040A54C7AA85

Amount of Each Receipt this Period
50.00

Memo Item

C. GAPULTOS, FILOMENO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 HIGH PINE DR.

City RUSSELLVILLE	State AL	Zip Code 35654
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A676BB51471C14737B1F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 708 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GARABEDIAN, GARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 LAKE HAMILTON DR.
 B5
 City HOT SPRINGS NATIONAL PARK State AR Zip Code 71913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE Occupation (for Individual) CLAIM SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **03 / 13 / 2021**
Transaction ID : A9B49D3041B7A437B906
 Amount of Each Receipt this Period 75.00
 Memo Item

B. GARABEDIAN, GARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 LAKE HAMILTON DR.
 B5
 City HOT SPRINGS NATIONAL PARK State AR Zip Code 71913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE FARM INSURANCE Occupation (for Individual) CLAIM SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 13 / 2021**
Transaction ID : A5D6E06D07D0842D2BA9
 Amount of Each Receipt this Period 75.00
 Memo Item

C. GARCIA, MIREYA, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1714 FERDINAND STREET
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : AF9FF0B85A13E4D4AAC7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 709 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GARCIA, MIREYA, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1714 FERDINAND STREET
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 02 / 2021
Transaction ID : AF9C8CC64428B472E830
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GARDINER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75974 US HIGHWAY 50
 City ALBANY State OH Zip Code 45710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 03 / 26 / 2021
Transaction ID : A269C36B74A06454BF1
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GARDNER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90440 CLARK ROAD
 City WARRENTON State OR Zip Code 97146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 08 / 2021
Transaction ID : A2D64D08F61F744E691F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 710 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GARDNER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90440 CLARK ROAD
 City WARRENTON State OR Zip Code 97146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A7307B3BDCE144B02AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GAROFALO, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17827 68TH AVE EAST
 City PUYALLUP State WA Zip Code 98375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A691F4E8C722943789C4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GARZA, TERESA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 E 19 TH ST
 City MISSION State TX Zip Code 78572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A97AC0467C2BD494CAFF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 711 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GARZA, TERESA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 E 19 TH ST
 City MISSION State TX Zip Code 78572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A3D2993B6D71B487E917
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GATCH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P0 BOX 32013
 City CHARLESTON State SC Zip Code 29417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAROLINA ELITE REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AF00C77D2E5A94FE39F3
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. GAUDENTI, YUNI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 HILLTOP CIRCLE
 City RANCHO PALOS VERDES State CA Zip Code 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2021
Transaction ID : A89FAE18AE59541BEAB8
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 712 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAUDENTI, YUNI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 HILLTOP CIRCLE
 City RANCHO PALOS VERDES State CA Zip Code 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A0B0F5FC4CE844A2D955
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GAUDENTI, YUNI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 HILLTOP CIRCLE
 City RANCHO PALOS VERDES State CA Zip Code 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 04 / 20 / 2021
Transaction ID : ADD6FEFBDDC8547F8B44
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GAUDENTI, YUNI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 HILLTOP CIRCLE
 City RANCHO PALOS VERDES State CA Zip Code 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A7E4D6F4EC8C74D78836
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

135.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 713 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2021

Transaction ID : A136BF5FD4C4E4A3FB1E

Amount of Each Receipt this Period
 35.00

Memo Item

B. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2021

Transaction ID : A56612DC1BE8D4658870

Amount of Each Receipt this Period
 35.00

Memo Item

C. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2021

Transaction ID : A3AE525C2CE7E44CC9E9

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 714 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED
 Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 345.00

Date of Receipt
 03 / 13 / 2021
Transaction ID : AB35B4ED909FD49EDB58

Amount of Each Receipt this Period
 35.00

Memo Item

B. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED
 Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 415.00

Date of Receipt
 03 / 17 / 2021
Transaction ID : A8632A20E86894A3C86B

Amount of Each Receipt this Period
 35.00

Memo Item

C. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED
 Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 415.00

Date of Receipt
 03 / 17 / 2021
Transaction ID : A9F32DA3E9FBF43C2A59

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 715 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAY, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2021

Transaction ID : AFE7840E531CF40DBABA

Amount of Each Receipt this Period
50.00

Memo Item

B. GAY, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2021

Transaction ID : A03EAE7E20B31441AB12

Amount of Each Receipt this Period
35.00

Memo Item

C. GAY, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A7AC2CBC2481E4DF6AB7

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 716 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079
 City SULTAN State WA Zip Code 98294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : AE032C8D7756C4BA782B
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079
 City SULTAN State WA Zip Code 98294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : A38610C10A60A456FA61
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079
 City SULTAN State WA Zip Code 98294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : ABE95F5FC4AE6413686A
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 717 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAY, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : A6D1164D1F33341A5971

Amount of Each Receipt this Period
35.00

Memo Item

B. GAY, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : A1623EFD95D514D2D9EE

Amount of Each Receipt this Period
35.00

Memo Item

C. GAY, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2021

Transaction ID : A7B8641310CA446D7A70

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 718 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079
 City SULTAN State WA Zip Code 98294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A2F3A9521563540A9820
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079
 City SULTAN State WA Zip Code 98294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A51390F8482814756B4A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079
 City SULTAN State WA Zip Code 98294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A87BD939A2A3D4956936
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 719 OF 3012		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GAY, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1079

City SULTAN	State WA	Zip Code 98294
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
930.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A92D404D25E7A4B3CBAD

Amount of Each Receipt this Period
50.00

Memo Item

B. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 N. LAKE SHORE DR.

City CHICAGO	State IL	Zip Code 60610
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) TRADING/INVESTMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : AF851B4FBF340473B9F9

Amount of Each Receipt this Period
50.00

Memo Item

C. GAYNOR, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 N. LAKE SHORE DR.

City CHICAGO	State IL	Zip Code 60610
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) TRADING/INVESTMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A1D83F23F83654B22BD7

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 720 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GEARON, J MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4476 WOODLAND BROOK
 City ATLANTA State GA Zip Code 30339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AEC7698CBA44E4B5B835
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GEARY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 N 13TH
 City NORFOLK State NE Zip Code 68701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEG ENTERPRISES Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : AD497D02269554206ADB
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GEARY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 N 13TH
 City NORFOLK State NE Zip Code 68701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEG ENTERPRISES Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 02 / 2021
Transaction ID : A19E481DE27854ADE93A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 721 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GEARY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 N 13TH
 City NORFOLK State NE Zip Code 68701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEG ENTERPRISES Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A2F350DCE954E46F8B11
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GEARY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 N 13TH
 City NORFOLK State NE Zip Code 68701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEG ENTERPRISES Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A8F65A5E668204E7FA44
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GEE, ARNOLD, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 BROOKDALE RD E
 City TACOMA State WA Zip Code 98445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A9E8F30527DE8421EA6B
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 722 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GEHRKE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4508 SALUTO CT
 City SAN DIEGO State CA Zip Code 92130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AC62CD81A04CD4ABA88E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GEISLER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88500 OVERSEAS HWY APT 509
 City TAVERNIER State FL Zip Code 22070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A79C2D042D3FD447CB0D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GELB, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 FIVTH AVE 10B
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A0413D066DAC74D19B1E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 723 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GELB, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 FIFTH AVE
 10B
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : AB705C9629DE74F38882
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GELB, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 FIFTH AVE
 10B
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A45C74C213BE44571B52
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GENTHER, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 S POPLAR AVE
 City WHITE CLOUD State MI Zip Code 49349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AD7F20675BDBF4182805
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 724 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GENTHER, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 S POPLAR AVE
 City WHITE CLOUD State MI Zip Code 49349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : AABC203E1E8C24903A74
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GENZ, WAYNE, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 EVERGREEN RD
 City EDISON State NJ Zip Code 08837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A45ED869ACAFC4D409E4
 Amount of Each Receipt this Period
 1500.00
 Memo Item

C. GENZ, WING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 EVERGREEN RD
 City EDISON State NJ Zip Code 08837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : A839D983F1B164A958E0
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 725 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GEORGE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7706 TOMMASI COURT
 City NAPLES State FL Zip Code 34114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : ACE6BD275369E40258E3
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GEORGE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7706 TOMMASI COURT
 City NAPLES State FL Zip Code 34114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A593528E5870E4A6AB7E
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GERALD, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 FAIRWAY DR
 City SWEETWATER State TX Zip Code 79556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A493D18F57EF746B78E0
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 726 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERALD, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 FAIRWAY DR
 City SWEETWATER State TX Zip Code 79556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A9C896687FDF548048C6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GERALD, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 FAIRWAY DR
 City SWEETWATER State TX Zip Code 79556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A6D92E95AB8664F0D924
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GERATHS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7201 E 32ND ST
 708
 City YUMA State AZ Zip Code 85365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : ACE7CC64D79A3403D847
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 727 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2021
Transaction ID : A2E87DCC971444B4CB43
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2021
Transaction ID : A37A7B99709664D1BA8D
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2021
Transaction ID : A2E715C3A2305443897E
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 728 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2021
Transaction ID : A8B82CA69EC1B467CAA5
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2021
Transaction ID : A081BB69207B64C328A2
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2021
Transaction ID : AA65FEF9A23F34FF3A18
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 729 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2021
Transaction ID : AE2C19065CC7B44E987F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2021
Transaction ID : AC7FE60287CE044509BC
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2021
Transaction ID : A74A2B6A122CF4B32955
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 730 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A5B6B72F56E384D99A7F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 25 / 2021
Transaction ID : A9C2C65D7F9A24974A9F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 25 / 2021
Transaction ID : ABFBA3A2F0E6043B9A88
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 731 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : ABC9237681AAB42A9A19
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2021
Transaction ID : A8E0DC5B0333492784D
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : AFE7444AE7D064CE987E
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 732 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 DUNCAN CREEK RD

City BUFORD	State GA	Zip Code 30519
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2021

Transaction ID : A5EDDC5BDB71142E490C

Amount of Each Receipt this Period
100.00

Memo Item

B. GERLACH, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 DUNCAN CREEK RD

City BUFORD	State GA	Zip Code 30519
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2021

Transaction ID : A223111786FE4D0E8D6

Amount of Each Receipt this Period
50.00

Memo Item

C. GERLACH, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5237 DUNCAN CREEK RD

City BUFORD	State GA	Zip Code 30519
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2021

Transaction ID : AEB550B89F2324388969

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 733 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A527A0740B46B4E32B04
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A9762A454482E4CCCAD0
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A66360DC727D54B1CA07
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 734 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AB412DBE468AC4DEC9C5
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A5FF67058293545D29BB
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : A6A06D9BBA62543109A9
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 735 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GERLACH, NANCY, , ,

Mailing Address 5237 DUNCAN CREEK RD

City BUFORD	State GA	Zip Code 30519
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2021

Transaction ID : A68AFE5A3CB954295ABF

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GERLACH, NANCY, , ,

Mailing Address 5237 DUNCAN CREEK RD

City BUFORD	State GA	Zip Code 30519
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2021

Transaction ID : A80833CCF906242D9A39

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GERLACH, NANCY, , ,

Mailing Address 5237 DUNCAN CREEK RD

City BUFORD	State GA	Zip Code 30519
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2021

Transaction ID : AD003FB6AF5614D32998

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 736 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GERLACH, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5237 DUNCAN CREEK RD
 City BUFORD State GA Zip Code 30519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt **06 / 26 / 2021**
Transaction ID : AB3B5538EF4FF4F27B16
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GERRA, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4304 VERDE VIS
 City GEORGETOWN State TX Zip Code 78628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : A17EE2ABB37C44C2B882
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GERRA, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4304 VERDE VIS
 City GEORGETOWN State TX Zip Code 78628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 10 / 2021**
Transaction ID : A54DC916E0B95452C86C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

200.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 737 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GEVEDEN, BRUCE, , ,		Date of Receipt MM / DD / YYYY 03 / 29 / 2021 Transaction ID : ADFD7AC82B56748ADB99
Mailing Address P0 BOX 609		Amount of Each Receipt this Period 350.00
City COTTONWOOD	State CA	Zip Code 96022
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SELF	Occupation (for Individual) RESTAURANT/ CONSTRUCTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GEVEDEN, BRUCE, , ,		Date of Receipt MM / DD / YYYY 04 / 26 / 2021 Transaction ID : AB7E6CA1F7BEE4C54A44
Mailing Address P0 BOX 609		Amount of Each Receipt this Period 40.00
City COTTONWOOD	State CA	Zip Code 96022
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SELF	Occupation (for Individual) RESTAURANT/ CONSTRUCTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GEVEDEN, BRUCE, , ,		Date of Receipt MM / DD / YYYY 05 / 26 / 2021 Transaction ID : A446FAF2ADD8044B2ABE
Mailing Address P0 BOX 609		Amount of Each Receipt this Period 40.00
City COTTONWOOD	State CA	Zip Code 96022
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SELF	Occupation (for Individual) RESTAURANT/ CONSTRUCTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 430.00	

SUBTOTAL of Receipts This Page (optional).....	430.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 738 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GEVEDEN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P0 BOX 609

City COTTONWOOD	State CA	Zip Code 96022
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RESTAURANT/ CONSTRUCTION
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AC81FE9BD6A284542984

Amount of Each Receipt this Period
 40.00

Memo Item

B. GHALY, NASRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 STANDISH TERRACE

City SYRACUSE	State NY	Zip Code 13224
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIANS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A5D39FE40351C4E528F4

Amount of Each Receipt this Period
 100.00

Memo Item

C. GHALY, NASRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 STANDISH TERRACE

City SYRACUSE	State NY	Zip Code 13224
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIANS
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A46D2E79723B94EAF9A2

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 739 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GHALY, NASRI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 STANDISH TERRACE

City SYRACUSE	State NY	Zip Code 13224
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIANS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2021

Transaction ID : A3DFA40DBF3B84F9EA8A

Amount of Each Receipt this Period
100.00

Memo Item

B. GHALY, NASRI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 STANDISH TERRACE

City SYRACUSE	State NY	Zip Code 13224
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIANS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : AE7CC600411F143E3BF3

Amount of Each Receipt this Period
100.00

Memo Item

C. GIACALONE, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6516 WINDSOR DR.

City PARKLAND	State FL	Zip Code 33067
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPIRIT AIRLINES	Occupation (for Individual) FLIGHT ATTENDANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2021

Transaction ID : ACF3E5DFC44344DA6B80

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 740 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIACALONE, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6516 WINDSOR DR.
 City PARKLAND State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPIRIT AIRLINES Occupation (for Individual) FLIGHT ATTENDANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : ADC7ABE77239A46FEB9D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIANDOMENICO, KALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 GARDEN DR.
 City BOYNTON BEACH State FL Zip Code 33436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A3E07E5BACA0E41FCAE2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GIANGIULIO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 INDIAN RUN RD.
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. A. THOMSON CO. Occupation (for Individual) INSURANCE BROKERAGE OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A0FD45545FD8549B69E5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 741 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIANGIULIO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 INDIAN RUN RD.
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. A. THOMSON CO. Occupation (for Individual) INSURANCE BROKERAGE OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A5FDCC27EA1534F18966
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIANNINI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 981 HIGHLAND CHURCH ROAD
 City PADUCAH State KY Zip Code 42001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A38B07C54769342FC8CF
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GIANNINI, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 981 HIGHLAND CHURCH ROAD
 City PADUCAH State KY Zip Code 42001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2021
Transaction ID : ABE45971627B04A1CB51
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 742 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIANNINI, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 981 HIGHLAND CHURCH ROAD

City PADUCAH	State KY	Zip Code 42001
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A9C253FBDAD88430E859

Amount of Each Receipt this Period
100.00

Memo Item

B. GIANNINI, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 981 HIGHLAND CHURCH ROAD

City PADUCAH	State KY	Zip Code 42001
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : A9810D75BA2954972A64

Amount of Each Receipt this Period
100.00

Memo Item

C. GIBB, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 570 OCEAN DRIVE
PHN

City NORTH PALM BEACH	State FL	Zip Code 33408
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2021

Transaction ID : A11B8E5ABEF7F4BDC851

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 743 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIBB, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 570 OCEAN DRIVE
 PHN
 City NORTH PALM BEACH State FL Zip Code 33408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A1F982B47182C4FA3B12
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GIBBS, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2802 SEMINARY CIR
 City GARLAND State TX Zip Code 75043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : ACE558C4E8B6441A9A23
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. GIBBS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 BAYVIEW CIR
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN BUSINESS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2021
Transaction ID : A5689D8FFBF51422ABE3
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 744 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIBBS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 BAYVIEW CIR
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **02 / 13 / 2021**
Transaction ID : AC0A63C97E95849F8919
 Amount of Each Receipt this Period 25.00
 Memo Item

B. GIBBS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 BAYVIEW CIR
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **03 / 13 / 2021**
Transaction ID : A43C70B276DD0491AB84
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GIBBS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 BAYVIEW CIR
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 13 / 2021**
Transaction ID : A21D21650B7F94E909CC
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 745 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIBBS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 BAYVIEW CIR
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN BUSINESS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A648F1C1F6CC543DDA7B
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GIBBS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 BAYVIEW CIR
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN BUSINESS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A88A84CC806B44CEC98A
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. GIBBS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9038 BAYVIEW CIR
 City PLAINFIELD State IN Zip Code 46168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWN BUSINESS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A8315534F3A034008827
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 746 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIBERSON, SUSAN, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 709 OCEAN AVE
39

City AVON BY THE SEA State NJ Zip Code 07717

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 11 / 2021
Transaction ID : A3413E2F6D78B4F7DAA9

Amount of Each Receipt this Period
50.00

Memo Item

B. GIBERSON, SUSAN, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 709 OCEAN AVE
39

City AVON BY THE SEA State NJ Zip Code 07717

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 11 / 2021
Transaction ID : ADC5B871A35EB4E96AED

Amount of Each Receipt this Period
50.00

Memo Item

C. GIBSON, DEBRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7516 DISPENSARY

City HITCHCOCK State TX Zip Code 77563

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PINS & NEEDLES Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 15 / 2021
Transaction ID : A7A4723399A284DA0AA8

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 747 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIBSON, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7516 DISPENSARY
 City HITCHCOCK State TX Zip Code 77563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINS & NEEDLES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ADC2B0B3F53864EA38C8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIBSON, RHONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6919 MOSQUITO ROAD
 City PLACERVILLE State CA Zip Code 95667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A9EEF642E2338463FB5E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GIBSON, RHONDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6919 MOSQUITO ROAD
 City PLACERVILLE State CA Zip Code 95667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A4451288C18564631951
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 748 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIDDENS, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3130 JOLLEY DR
 City BURBANK State CA Zip Code 91504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A47AA63E180B84288A50
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIDEON, JOSEPH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 NORMENT RD SW
 City ALBUQUERQUE State NM Zip Code 87105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A0CD2D6FF7C3949ACBED
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GIETZ, DELILAH, H, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 CAMP MOREHEAD DR.
 City MOREHEAD CITY State NC Zip Code 28557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 23 / 2021
Transaction ID : AEF94B777DA2C482694F
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 749 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIETZ, DELILAH, H, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 CAMP MOREHEAD DR.
 City MOREHEAD CITY State NC Zip Code 28557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 17 / 2021
Transaction ID : AB902CBF745544CD382C
 Amount of Each Receipt this Period 25.00
 Memo Item

B. GIETZ, DELILAH, H, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 CAMP MOREHEAD DR.
 City MOREHEAD CITY State NC Zip Code 28557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A1A4AAEF4A2B6848A2A70
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GIFFIN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3296 HOLLOW CORNERS RD
 City DRYDEN State MI Zip Code 48428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 05 / 2021
Transaction ID : A77178ECE678142C9ABB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 750 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIFFIN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3296 HOLLOW CORNERS RD
 City DRYDEN State MI Zip Code 48428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2021
Transaction ID : A023EFCE5C3194712A48
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GIFFIN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3296 HOLLOW CORNERS RD
 City DRYDEN State MI Zip Code 48428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : A09D3DAF9EC2A45118AD
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GIFFIN, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3296 HOLLOW CORNERS RD
 City DRYDEN State MI Zip Code 48428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A4702130F348E47E88A2
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 751 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIFFIN, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3296 HOLLOW CORNERS RD

City DRYDEN	State MI	Zip Code 48428
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : AE11B4AAEA592465EA68

Amount of Each Receipt this Period
100.00

Memo Item

B. GIFFIN, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3296 HOLLOW CORNERS RD

City DRYDEN	State MI	Zip Code 48428
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2021

Transaction ID : ADF35E3E920BC4E5DB6D

Amount of Each Receipt this Period
100.00

Memo Item

C. GILE, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2328 N TOWERVIEW LN

City BOISE	State ID	Zip Code 83702
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2021

Transaction ID : AC488E1EC97464806809

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 752 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GILLAN, PERDITTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3124 W 62 AVE.
 City DENVER State CO Zip Code 80221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A391EE8CB8D0A40AF859
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GILL, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 SHIRE AVENUE
 City OCEANSIDE State CA Zip Code 92057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AF4C9A136B1BE405B874
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GILL, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1735 SHIRE AVENUE
 City OCEANSIDE State CA Zip Code 92057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A15A549F0D7A64057AA2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 753 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GILLETT, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 JADE ST NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021
Transaction ID : A833B8EA6A6B14BCFA67
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. GILLETT, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 JADE ST NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : A6B58DCCC115E4E9CB38
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. GILLETT, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 JADE ST NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : A75C8DCF3792F445ABCE
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 754 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GILLETT, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 JADE ST NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : ACC59152446C145298CD
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GILLETT, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 JADE ST NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A2D969A5D37114863A0C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GILLETT, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 JADE ST NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A214B789D75B04BC9884
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 755 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GILLET, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 JADE ST NE
 City SALEM State OR Zip Code 97305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AF0D009A599864119BC1
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GILLIGAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 MOUNT EYRE ROAD
 City WASHINGTON CROSSING State PA Zip Code 18977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : ACE118CAD4FFA41EDA9A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GILLIGAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1049 MOUNT EYRE ROAD
 City WASHINGTON CROSSING State PA Zip Code 18977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A16B3FA8C24AE4913935
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 756 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GILMORE, LEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 2293

City LONGVIEW	State WA	Zip Code 98632
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021

Transaction ID : A715F944944604960894

Amount of Each Receipt this Period
 50.00

Memo Item

B. GILMORE, LEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 2293

City LONGVIEW	State WA	Zip Code 98632
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021

Transaction ID : A3CFC889F9548447088C

Amount of Each Receipt this Period
 50.00

Memo Item

C. GILMORE, LEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 2293

City LONGVIEW	State WA	Zip Code 98632
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021

Transaction ID : A9ED9F695D8514D55B35

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 757 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GILMORE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 WALNUT PLAIN ROAD
 P O BOX 67

City SOUTH CARVER State MA Zip Code 02770

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GILMORE CRANBERRY CO., INC. Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A579B22BC3FFD447B9E5

Amount of Each Receipt this Period 50.00

Memo Item

B. GILMORE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 WALNUT PLAIN ROAD
 P O BOX 67

City SOUTH CARVER State MA Zip Code 02770

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GILMORE CRANBERRY CO., INC. Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AFF0097B0B34B44FD804

Amount of Each Receipt this Period 50.00

Memo Item

C. GILSTAD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9940 SW PEACE RIVER STREET

City ARCADIA State FL Zip Code 34269

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : A0A74BBCF5F7B4216BC8

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 758 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GILSTAD, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9940 SW PEACE RIVER STREET
 City ARCADIA State FL Zip Code 34269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 04 / 2021**
Transaction ID : A29D682AA226948E2ADF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIORDANO, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 GEORGE STREET
 City AVENEL State NJ Zip Code 07001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **03 / 28 / 2021**
Transaction ID : ABD5B4B42FD9845F9BFE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GIORDANO, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 GEORGE STREET
 City AVENEL State NJ Zip Code 07001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : A0CD1C130250A41C0B5F
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 759 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIORDANO, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 GEORGE STREET
 City AVENEL State NJ Zip Code 07001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : AE26500FEACAB44E99A3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIORDANO, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7689 SUNDIAL LANE
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIOCESE OF ORLANDO Occupation (for Individual) CLINIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : A01A4747DC342487E82F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 25 / 2021**
Transaction ID : A172796A5A01240DFB55
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 760 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **02 / 28 / 2021**
Transaction ID : A128AB94FD42F411AA8B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **03 / 25 / 2021**
Transaction ID : AC7DF0A9A45AF42B1AD8
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **03 / 29 / 2021**
Transaction ID : A2AE4A1DFAAE44C489FA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 761 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 30 / 2021
Transaction ID : AA50AFB7C3859400BB2B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 04 / 25 / 2021
Transaction ID : A91722EFA766C4B779F6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AF2FD5C1EC8F74F16A23
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 762 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A56536521F5C44E5DA8E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : AC9B2AB7F73404B45AE0
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A60AE77EE47944AFF97C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 763 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AA104FE549E8F49649C3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GIRARDIN, JEAN-MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 477 OCEAN BLVD
 City MIAMI State FL Zip Code 33167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 06 / 30 / 2021
Transaction ID : ADBDB5D38A40C4EB3813
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GITSCHIER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 ADAMS ROAD
 City BREINIGSVILLE State PA Zip Code 18031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A5F472C1ED19B40029BD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 764 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GITSCHIER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 ADAMS ROAD
 City BREINIGSVILLE State PA Zip Code 18031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AD4153275DCB546D2B03
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GJOLAJ, GJOKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51293 FORSTER LANE
 City SHELBY TOWNSHIP State MI Zip Code 48316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&S COATING Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A8D30499486AD4DFCAE9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GJOLAJ, GJOKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51293 FORSTER LANE
 City SHELBY TOWNSHIP State MI Zip Code 48316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&S COATING Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A3982E1EF8CBC40D5BC6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 765 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GLASS, IKE, , ,

Mailing Address 813 WEST 8TH

City NEWKIRK	State OK	Zip Code 74647
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLASS TRUCKING	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021

Transaction ID : A75EC5CF35831426CAA3

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GLASS, IKE, , ,

Mailing Address 813 WEST 8TH

City NEWKIRK	State OK	Zip Code 74647
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GLASS TRUCKING	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021

Transaction ID : ABC5225A37C3C45608F3

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GLEASON, MARGARET, , ,

Mailing Address 6001 E SAN CRISTOBAL ST

City TUCSON	State AZ	Zip Code 85716
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021

Transaction ID : A1527BA2C5AD94456BFF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 766 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GLEASON, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6001 E SAN CRISTOBAL ST
 City TUCSON State AZ Zip Code 85716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A8009F0ABD21A4EC983A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GLEASON, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6552 BURNHAM CIRCLE
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIDAL MARKET INSIGHTS Occupation (for Individual) MARKET RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 07 / 2021
Transaction ID : AC70996AF46874A5FAE1
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GLEASON, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6552 BURNHAM CIRCLE
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIDAL MARKET INSIGHTS Occupation (for Individual) MARKET RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A9107DA0D44C5499788B
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 767 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GLEASON, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6552 BURNHAM CIRCLE
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIDAL MARKET INSIGHTS Occupation (for Individual) MARKET RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A1ED63507BD91430B9E5
 Amount of Each Receipt this Period 25.00
 Memo Item

B. GLEASON, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6552 BURNHAM CIRCLE
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIDAL MARKET INSIGHTS Occupation (for Individual) MARKET RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A3B53B1B68CEC419985B
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GLEITER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 WEXCROFT LN
 City ALPHARETTA State GA Zip Code 30009-8761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2021
Transaction ID : AE41843B026FA47A295A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 768 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GLEITER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 WEXCROFT LN
 City ALPHARETTA State GA Zip Code 30009-8761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 12 / 2021**
Transaction ID : A769010B280DF45D7AEE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GLESSNER, LONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11056 W. ROWLAND AVE
 City LITTLETON State CO Zip Code 80127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DRAPER & KRAMER MORTGAGE Occupation (for Individual) MORTGAGE LOAN OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 04 / 2021**
Transaction ID : A5D131148E882493B95
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GLOVER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 BALTIMORE ANNAPOLIS BLVD
 City ARNOLD State MD Zip Code 21012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **05 / 18 / 2021**
Transaction ID : A59063AFE86644976950
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 769 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GLOVER, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1668 BALTIMORE ANNAPOLIS BLVD

City ARNOLD	State MD	Zip Code 21012
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Transaction ID : A40DEDA5AF46F47B9BE5

Amount of Each Receipt this Period
25.00

Memo Item

B. GLOVER, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1668 BALTIMORE ANNAPOLIS BLVD

City ARNOLD	State MD	Zip Code 21012
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2021

Transaction ID : A7C02A06ECC174CF7A8E

Amount of Each Receipt this Period
25.00

Memo Item

C. GLOVER, PAULA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9800 SW 132 TERR

City MIAMI	State FL	Zip Code 33176
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A25EB7E532AC8466A95B

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 770 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOCHNOUR, LUANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1249 E KIMBERLEY LN
 City BOISE State ID Zip Code 83712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : A4B4A7AA5CB174F01B49
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GOCHNOUR, LUANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1249 E KIMBERLEY LN
 City BOISE State ID Zip Code 83712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : ACA8DE344F9FF4CCD980
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GOCHNOUR, LUANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1249 E KIMBERLEY LN
 City BOISE State ID Zip Code 83712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2021
Transaction ID : AAD763FBE79AE488483E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 771 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GODDARD, DONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 954
 City BOONEVILLE State MS Zip Code 38829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : A2774843F59A74F09B28
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GODDARD, DONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 954
 City BOONEVILLE State MS Zip Code 38829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A090344C0A6CE48E3A66
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GODFREDSON, DEREK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1586 290TH ST.
 City SALIX State IA Zip Code 51052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A9FB727BF357C45A885A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 772 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GODFREY, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 BIELENBERG DRIVE
 City WOODBURY State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL CENTER OF COACHING LEARN Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A046F5193C6B04B61AF2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GODINEZ, LAURELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8738 LUPINE DRIVE
 City AMARILLO State TX Zip Code 79119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PANTEC Occupation (for Individual) PRODUCTION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : ACFA6DAAE37824328BE3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GODINEZ, LAURELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8738 LUPINE DRIVE
 City AMARILLO State TX Zip Code 79119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PANTEC Occupation (for Individual) PRODUCTION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A460B023456F9418D862
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 773 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOEDEL, DORETHEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 RUSSELLTON DORSEYVILLE RD
 City CHESWICK State PA Zip Code 15024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 25 / 2021**
Transaction ID : A84B7321629CE4EAEABB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GOEDEL, DORETHEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 RUSSELLTON DORSEYVILLE RD
 City CHESWICK State PA Zip Code 15024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : A1BD96A3846D949C5B45
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GOEDEL, DORETHEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 RUSSELLTON DORSEYVILLE RD
 City CHESWICK State PA Zip Code 15024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **06 / 25 / 2021**
Transaction ID : A10390C908124478BA40
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 774 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOELLNER, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7761 MONTICELLO DR
 City BELVIDERE State IL Zip Code 61008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOME MAKER Occupation (for Individual) HOME MAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A68370468FF9441BFB7A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GOELLNER, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7761 MONTICELLO DR
 City BELVIDERE State IL Zip Code 61008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOME MAKER Occupation (for Individual) HOME MAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A8FE119FB6E094930A42
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GOFF, CLIFFORD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RHYNAS DR
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATR Occupation (for Individual) SYSTEM ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A6625945D72BC4D098E7
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 775 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOFF, CLIFFORD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RHYNAS DR
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATR Occupation (for Individual) SYSTEM ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : AEE6D1795D2E04F21BB1
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. GOFF, CLIFFORD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RHYNAS DR
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATR Occupation (for Individual) SYSTEM ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A008AD9B2D5FE4829B43
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. GOFF, CLIFFORD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RHYNAS DR
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATR Occupation (for Individual) SYSTEM ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : AEB53C06BB9184C27A80
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 776 OF 3012	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	11c	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	15	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOFF, CLIFFORD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RHYNAS DR
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATR Occupation (for Individual) SYSTEM ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : AFEEBFD5659DD4986AA2
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. GOFF, CLIFFORD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RHYNAS DR
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATR Occupation (for Individual) SYSTEM ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A565C87AF67864E12815
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. GOFF, WARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5241 WALDORF RD
 City DELTON State MI Zip Code 49046-8307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : A9DD34B4AE64645F2836
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 777 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOLDBERG, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRICS OF SW HOUSTON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A4C005CE2E28B4344976
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GOLDBERG, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRICS OF SW HOUSTON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **05 / 08 / 2021**
Transaction ID : AD86EEF029138400E923
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GOLDBERG, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRICS OF SW HOUSTON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : AABF71477CC1F43A78F7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 778 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOLDBERG, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRICS OF SW HOUSTON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A8D89EC896E5D4E6E983
 Amount of Each Receipt this Period 25.00
 Memo Item

B. GOLDBERG, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRICS OF SW HOUSTON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A6D408999AE474F01AC0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GOLDBERG, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRICS OF SW HOUSTON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AB17DBD9ED1CF4269A92
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 779 OF 3012 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOLDBERG, JACOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 BRIAR HOLLOW LANE
 City HOUSTON State TX Zip Code 77027-9315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEDIATRICS OF SW HOUSTON Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AA35432AB9A0442B3959
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GOLDEN, GEORGIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 GREENE AVENUE
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AB905F289CB7D4E308E8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GOLDSBURY, KIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 PEARL PARKWAY 300
 City SAN ANTONIO State TX Zip Code 78215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVER VENTURES Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A244BFFDE19AC44BB9EC
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5070.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 780 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOODE, JAMES, J, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 AEGEAN ROAD

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC	Occupation (for Individual) AIR SAFETY INVESTIGATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2021

Transaction ID : A5BB774A6AC3B4EA6B0E

Amount of Each Receipt this Period
35.00

Memo Item

B. GOODE, JAMES, J, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 AEGEAN ROAD

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC	Occupation (for Individual) AIR SAFETY INVESTIGATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2021

Transaction ID : AD28951B8C7F340D0BE6

Amount of Each Receipt this Period
35.00

Memo Item

C. GOODE, JAMES, J, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 AEGEAN ROAD

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC	Occupation (for Individual) AIR SAFETY INVESTIGATOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2021

Transaction ID : A4D92871EC60D4760B41

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 781 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOODE, JAMES, J, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 AEGEAN ROAD

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC	Occupation (for Individual) AIR SAFETY INVESTIGATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A0C25D9DE7DFE4F8FA41

Amount of Each Receipt this Period
35.00

Memo Item

B. GOODE, JAMES, J, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 AEGEAN ROAD

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC	Occupation (for Individual) AIR SAFETY INVESTIGATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2021

Transaction ID : ACF3A787DCF7E4313BFF

Amount of Each Receipt this Period
35.00

Memo Item

C. GOODE, JAMES, J, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 AEGEAN ROAD

City PALM BEACH GARDENS	State FL	Zip Code 33410
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC	Occupation (for Individual) AIR SAFETY INVESTIGATOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : ABE4B0D3C348147E99DD

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 782 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOODE, JAMES, J, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 AEGEAN ROAD
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC Occupation (for Individual) AIR SAFETY INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A48FFF40E8610487FB1D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GOODE, JAMES, J, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 AEGEAN ROAD
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAMPLE INTERNATIONAL AVIATION, INC Occupation (for Individual) AIR SAFETY INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A6AC9E78732754698A58
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GOOD, TRUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 457 SE 33RD AVE
 City HILLSBORO State OR Zip Code 97123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A6E8D681453B940799FA
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 783 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : A13AB7C34B601457BADD
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : AB9D529D0CE2C42C088A
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : ADBA904A8F6634285A98
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 784 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : A60303413E27E4C35933
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A8DD461B7676F4133B29
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A67607D3BBF3140EF9AA
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 785 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : AB0F7B6C25DEF4EECAC6
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A40C25A312E454765BA6
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GOOLSBY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BLVD
 5-I
 City DESTIN State FL Zip Code 32541-2576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A2A1E729D8E0E40389C2
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 786 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 WEST PAINE AVENUE
 City LAKEWOOD State CO Zip Code 80235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : A8D93ABE7BB3F4D1FA71
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 WEST PAINE AVENUE
 City LAKEWOOD State CO Zip Code 80235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AF8AE9E3CAC794280ABA
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 WEST PAINE AVENUE
 City LAKEWOOD State CO Zip Code 80235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : AA8FE0E529B4442129E7
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 787 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 WEST PAINE AVENUE
 City LAKEWOOD State CO Zip Code 80235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 03 / 31 / 2021
Transaction ID : AF45A3D64CB4C40FB85C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 WEST PAINE AVENUE
 City LAKEWOOD State CO Zip Code 80235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A11226C653E944F5FB65
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GOOS, JEAN, M, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 WEST PAINE AVENUE
 City LAKEWOOD State CO Zip Code 80235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A233595F219AE464FB70
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 788 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7840 WEST PAINE AVENUE**

City LAKEWOOD	State CO	Zip Code 80235
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : A842A0FB82F074189A86

Amount of Each Receipt this Period

35.00

 Memo Item

B. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7840 WEST PAINE AVENUE**

City LAKEWOOD	State CO	Zip Code 80235
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2021

Transaction ID : ADC70DE4E883249E4AC9

Amount of Each Receipt this Period

50.00

 Memo Item

C. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7840 WEST PAINE AVENUE**

City LAKEWOOD	State CO	Zip Code 80235
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2021

Transaction ID : AB02E7614388449CA890

Amount of Each Receipt this Period

50.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 789 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7840 WEST PAINE AVENUE

City LAKEWOOD	State CO	Zip Code 80235
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
710.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : A2FE6E56E2FC944F9A44

Amount of Each Receipt this Period
35.00

Memo Item

B. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7840 WEST PAINE AVENUE

City LAKEWOOD	State CO	Zip Code 80235
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2021

Transaction ID : A5C6D824FC0B14A4FA87

Amount of Each Receipt this Period
100.00

Memo Item

C. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7840 WEST PAINE AVENUE

City LAKEWOOD	State CO	Zip Code 80235
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
915.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2021

Transaction ID : A16A312827A554B3B8F2

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 790 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7840 WEST PAINE AVENUE**

City LAKEWOOD	State CO	Zip Code 80235
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **965.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : AEA0E387D6B6645219BF

Amount of Each Receipt this Period

50.00

 Memo Item

B. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7840 WEST PAINE AVENUE**

City LAKEWOOD	State CO	Zip Code 80235
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1015.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2021

Transaction ID : AC4E12FCC0D6F49E89C0

Amount of Each Receipt this Period

50.00

 Memo Item

C. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7840 WEST PAINE AVENUE**

City LAKEWOOD	State CO	Zip Code 80235
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A7B2D150685B249F9899

Amount of Each Receipt this Period

35.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 791 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOOS, JEAN, M, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7840 WEST PAINE AVENUE

City LAKEWOOD	State CO	Zip Code 80235
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		28		2021

Transaction ID : AD901488802154288B34

Amount of Each Receipt this Period
50.00

Memo Item

B. GORDON, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 SORRENTO RANCHES DRIVE

City NOKOMIS	State FL	Zip Code 34275
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIDGE BUDDY	Occupation (for Individual) MANUFACTURER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		16		2021

Transaction ID : A3884DF637B6F4971BF0

Amount of Each Receipt this Period
100.00

Memo Item

C. GORDON, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 SORRENTO RANCHES DRIVE

City NOKOMIS	State FL	Zip Code 34275
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIDGE BUDDY	Occupation (for Individual) MANUFACTURER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		16		2021

Transaction ID : A23D695A7722841A88AD

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 792 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GORDON, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 SORRENTO RANCHES DRIVE

City NOKOMIS	State FL	Zip Code 34275
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIDGE BUDDY	Occupation (for Individual) MANUFACTURER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2021

Transaction ID : AA80AF2DD0A3E47B8BFE

Amount of Each Receipt this Period
100.00

Memo Item

B. GORDON, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 SORRENTO RANCHES DRIVE

City NOKOMIS	State FL	Zip Code 34275
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRIDGE BUDDY	Occupation (for Individual) MANUFACTURER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2021

Transaction ID : ACAAEF1CDE5824842B30

Amount of Each Receipt this Period
100.00

Memo Item

C. GORSKI, ANATOLI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 STEWART STREET
16

City FRANKLIN	State MA	Zip Code 02038
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM	Occupation (for Individual) DIRECTOR OF CONSTRUCTION
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

Transaction ID : AA1CC36616A7F4B88854

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 793 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 05 / 2021

Transaction ID : A1FABCA77E2644B119E1

Amount of Each Receipt this Period 25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 14 / 2021

Transaction ID : A39E65674B0444862B15

Amount of Each Receipt this Period 35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 29 / 2021

Transaction ID : AD81FC9103D4C44A3B99

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 794 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt **04 / 05 / 2021**

Transaction ID : A7CD5B8ED71AD47288D1

Amount of Each Receipt this Period 25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt **04 / 14 / 2021**

Transaction ID : A59C2E18CB074448C80D

Amount of Each Receipt this Period 35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt **04 / 29 / 2021**

Transaction ID : A84690477FAA74785B6F

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 795 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
 / /

Transaction ID : A65BB11966F24AC0B35

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 / /

Transaction ID : AB1C354187EF34DF4950

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 / /

Transaction ID : AD99A27607E244F27929

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 796 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt 06 / 05 / 2021

Transaction ID : AF7BC89F0A58347D8B78

Amount of Each Receipt this Period 25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 14 / 2021

Transaction ID : A4C26A7A6EFDE414FBF6

Amount of Each Receipt this Period 35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GORSKI, ANATOLI, , ,

Mailing Address 20 STEWART STREET
16

City FRANKLIN State MA Zip Code 02038

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IPG PHOTONICS. COM Occupation (for Individual) DIRECTOR OF CONSTRUCTION

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 660.00

Date of Receipt 06 / 29 / 2021

Transaction ID : A6653A3E0E8594CA095D

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... 110.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 797 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOSHORN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 GIMLET LN
 City OLIVE HILL State KY Zip Code 41164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 08 / 2021
Transaction ID : A4A74213BA717428D81B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GOSHORN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 GIMLET LN
 City OLIVE HILL State KY Zip Code 41164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A1AADA22A582D4B68933
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GOSHORN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 GIMLET LN
 City OLIVE HILL State KY Zip Code 41164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A23D451801BE449FCB6F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 798 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GOSHORN, DAVID, , ,

Mailing Address 55 GIMLET LN

City OLIVE HILL State KY Zip Code 41164

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
05 / 08 / 2021
Transaction ID : A8AEA7C5B6BFD4973B28

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GOSHORN, DAVID, , ,

Mailing Address 55 GIMLET LN

City OLIVE HILL State KY Zip Code 41164

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
06 / 08 / 2021
Transaction ID : AC73C38B8096C4808BEF

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. GOSSELIN, LINDA, , ,

Mailing Address 67 ESSEX STREET

City SOUTH HAMILTON State MA Zip Code 01982

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) EQUESTRIAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 26 / 2021
Transaction ID : A3255CD841F5E46709AD

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 799 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOTTLIEB, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16408 BRAEBURN RIDGE TRAIL

City DELRAY BEACH	State FL	Zip Code 33446
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESINTECH INC.	Occupation (for Individual) TECHNOLOGIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2021

Transaction ID : A860C71F78F864A59AB7

Amount of Each Receipt this Period
50.00

Memo Item

B. GOTTLIEB, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16408 BRAEBURN RIDGE TRAIL

City DELRAY BEACH	State FL	Zip Code 33446
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RESINTECH INC.	Occupation (for Individual) TECHNOLOGIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2021

Transaction ID : A4EC5036D1D7946EB9C5

Amount of Each Receipt this Period
50.00

Memo Item

C. GOULD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28526 TALORI TERRACE

City BONITA SPRINGS	State FL	Zip Code 34135
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2021

Transaction ID : A91F6F994FBCE41D490C

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 800 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28526 TALORI TERRACE
 City BONITA SPRINGS State FL Zip Code 34135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 04 / 16 / 2021
Transaction ID : A62C757295FA74B44B9C
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28526 TALORI TERRACE
 City BONITA SPRINGS State FL Zip Code 34135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 05 / 16 / 2021
Transaction ID : A473E4D639A6A4315871
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GOULD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28526 TALORI TERRACE
 City BONITA SPRINGS State FL Zip Code 34135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 06 / 16 / 2021
Transaction ID : AC8FBEE6AA1BD4DEDB1
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 801 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOURLEY, MICHAEL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1045
 City MAYFIELD State KY Zip Code 42066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 21 / 2021
Transaction ID : ACD37DC2C914D499D8CE
 Amount of Each Receipt this Period 300.00
 Memo Item

B. GRABER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BALLYBUNION WAY
 City BLUFFTON State SC Zip Code 29910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A03311C8EC13D48B5945
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GRAHAM, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5307 QUICKSAND COVE
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VCU Occupation (for Individual) RESEARCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 15 / 2021
Transaction ID : AFFA95E9BCBCE487A92F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 802 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAHAM, CAROLYN, , ,

Mailing Address **5307 QUICKSAND COVE**

City **MIDLAND** State **TX** Zip Code **79707**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **VCU** Occupation (for Individual) **RESEARCHER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **04 / 13 / 2021**
Transaction ID : AB497F3DC933142D596B

Amount of Each Receipt this Period **25.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAHAM, CAROLYN, , ,

Mailing Address **5307 QUICKSAND COVE**

City **MIDLAND** State **TX** Zip Code **79707**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **VCU** Occupation (for Individual) **RESEARCHER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **04 / 15 / 2021**
Transaction ID : AF0063473277F4A57B53

Amount of Each Receipt this Period **50.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAHAM, CAROLYN, , ,

Mailing Address **5307 QUICKSAND COVE**

City **MIDLAND** State **TX** Zip Code **79707**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **VCU** Occupation (for Individual) **RESEARCHER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **05 / 13 / 2021**
Transaction ID : A957B3A3FDAB746D2B40

Amount of Each Receipt this Period **25.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **100.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 803 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAHAM, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5307 QUICKSAND COVE
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VCU Occupation (for Individual) RESEARCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A66648B232295443DB59
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GRAHAM, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5307 QUICKSAND COVE
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VCU Occupation (for Individual) RESEARCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A88DB786EEFB24A449EE
 Amount of Each Receipt this Period 25.00
 Memo Item

C. GRAHAM, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5307 QUICKSAND COVE
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VCU Occupation (for Individual) RESEARCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AB57C5BD0308F48F4BB9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 804 OF 3012
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAHAM, TOMMY, , ,
Mailing Address 7475 GAINEY RANCH ROAD # 7
City SCOTTSDALE State AZ Zip Code 85258
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 210.00

Date of Receipt
06 / 03 / 2021
Transaction ID : AA3F12A935E704DF3AF4
Amount of Each Receipt this Period
35.00
Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAINGER, SUSAN, , ,
Mailing Address PO BOX 2898
City SANTA MARIA State CA Zip Code 93457
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 300.00

Date of Receipt
03 / 31 / 2021
Transaction ID : AFCD35403206545F2A77
Amount of Each Receipt this Period
100.00
Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAINGER, SUSAN, , ,
Mailing Address PO BOX 2898
City SANTA MARIA State CA Zip Code 93457
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 400.00

Date of Receipt
04 / 30 / 2021
Transaction ID : A10A3D9D10A9E4B698C5
Amount of Each Receipt this Period
100.00
Memo Item

SUBTOTAL of Receipts This Page (optional)..... 235.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 805 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAINGER, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2898
 City SANTA MARIA State CA Zip Code 93457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A1720E9E54E154C169B1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GRAINGER, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2898
 City SANTA MARIA State CA Zip Code 93457
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A8870508CA602430A919
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GRANT, DEANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 NEWTOWN LANE 402
 City EAST HAMPTON State NY Zip Code 11937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A7FF7DA75E1674EF699C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 806 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRASDIE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3945 W 44TH ST
 City MINNEAPOLIS State MN Zip Code 55424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARDS WATER Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A3A5C00271F4D40FA885
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GRASDIE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3945 W 44TH ST
 City MINNEAPOLIS State MN Zip Code 55424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARDS WATER Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A58CF3F2775F84F0D959
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GRATZ, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 N BAYSHORE DR AP 2915
 City MIAMI State FL Zip Code 33132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : AE8997B7AB5E04FAF87F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 807 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRATZ, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 N BAYSHORE DR
 AP 2915
 City MIAMI State FL Zip Code 33132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AD3B5910280D04A2D9BC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GRAUL, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ESTUARY DRIVE
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 06 / 2021
Transaction ID : ACFA4DE441449467B9DE
 Amount of Each Receipt this Period 500.00
 Memo Item

C. GRAUL, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ESTUARY DRIVE
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 06 / 2021
Transaction ID : A4D8E8518BD624436B6F
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 808 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAVES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25029 N HORSESHOE TRL
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A55253BF12BCD4B37A0B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GRAVES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25029 N HORSESHOE TRL
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AB35DEF2FC8BC4A199C4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GRAY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 NW CALKINS AVE
 City ROSEBURG State OR Zip Code 97471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : AAD57D3DA17D9404FA32
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 809 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1865 NW CALKINS AVE

City ROSEBURG	State OR	Zip Code 97471
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2021

Transaction ID : A1F878C2B82B24788A60

Amount of Each Receipt this Period
100.00

Memo Item

B. GRAY, JEFFREY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 499 LEGACY DR.

City WESTERVILLE	State OH	Zip Code 43082
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2021

Transaction ID : ADAAE0C94A0D5446CA5B

Amount of Each Receipt this Period
50.00

Memo Item

C. GRAYKEN, KATE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 BEDFORD AVE

City NASHVILLE	State TN	Zip Code 37215
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : A11730E9A10DC483BAE3

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 810 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAYKEN, KATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 BEDFORD AVE
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AD0C0FA5932AB4C6CA6E
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GRAYKEN, KATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 BEDFORD AVE
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A81C5DC2949DE4F8DAFF
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GRAYKEN, KATE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3801 BEDFORD AVE
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AE2FEB53B2F88430787D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 811 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAY, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 8TH SUITE 620
 City WICHITA FALLS State TX Zip Code 76301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A38CEBAE9E1B34FD19C1
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. GRAY, RUSTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2069 WOODVIEW DR.
 City LEHI State UT Zip Code 84043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NSTYIE Occupation (for Individual) ELECTRICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A62B266D805A34AF1A7A
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GRAY, RUSTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2069 WOODVIEW DR.
 City LEHI State UT Zip Code 84043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NSTYIE Occupation (for Individual) ELECTRICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A4BF9BBE53989477D9F8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 812 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAY, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19170 LIBERTY RD
 City PRIDE State LA Zip Code 70770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLSTATE Occupation (for Individual) ALLSTATE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : A60D716C5A4E34F0AAA0
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2021
Transaction ID : AA419648B05AC42BEBF3
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : AE0CB1597C4324F44BD9
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 813 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : AF1B7668FC4D04D0D834
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2021
Transaction ID : A75B92DBADFD84CE6A09
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : AD89C242E5A794383B9A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 814 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A17B12280E8534060AB6
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : ABB6BEA0249C14621B72
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AE58406B0BD9A4C16940
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 815 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A88FE317071654F6A80C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A2D559C0A5A7447A0906
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A478EB7C751EB443AAD2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 816 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAY, WINIFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LARCH ROW
 City WENHAM State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PORTRAIT ARTIST REPRESENTATIV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AA73F8B401D20449F9F8
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GREENBARG, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2822 COASTAL RANGE WAY
 City LUTZ State FL Zip Code 33559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A26033CE8948B4A11AA1
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GREENBERG, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 N 22ND ST
 City ALLENTOWN State PA Zip Code 18104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GRAIN DEALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AEE0864D307744F4E9C5
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 817 OF 3012
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GREENBERG, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5110 SAN FELIPE 82W
 City HOUSTON State TX Zip Code 77056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OFFSHORE EQUIPMENT, LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2021
Transaction ID : AC7DA188260BB4B81970
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GREENBERG, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5110 SAN FELIPE 82W
 City HOUSTON State TX Zip Code 77056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OFFSHORE EQUIPMENT, LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A950CAE69455C40358E1
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GREENBERG, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5110 SAN FELIPE 82W
 City HOUSTON State TX Zip Code 77056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OFFSHORE EQUIPMENT, LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A88ABA39BC1964113978
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 818 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GREENBERG, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5110 SAN FELIPE
 82W
 City HOUSTON State TX Zip Code 77056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OFFSHORE EQUIPMENT, LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A14B990B07AF44318A67
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GREEN, EDYTHE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47180C HUI AKEPA PL
 C
 City KANEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL Occupation (for Individual) TSA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A77636BD11AA44668AC5
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GREEN, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5518 BEDFORD AVE.
 City LOS ANGELES State CA Zip Code 90056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AED3C8FC6FFA2438991D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 819 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 08 / 2021
Transaction ID : A171F015E7EA64BB7AB5
 Amount of Each Receipt this Period 60.00
 Memo Item

B. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A081B90152A8D4ED9A5B
 Amount of Each Receipt this Period 60.00
 Memo Item

C. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A940FD541E0B74E64BF4
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 820 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : AF3CB491230C54BA5BD7
 Amount of Each Receipt this Period 20.00
 Memo Item

B. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **05 / 08 / 2021**
Transaction ID : A1E29DE6D86E041A8843
 Amount of Each Receipt this Period 60.00
 Memo Item

C. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : AFB9F675460BD42478EE
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 821 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AE9B44E005590441BA5B
 Amount of Each Receipt this Period 60.00
 Memo Item

B. GREENMAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SPRUCE STREET
 City ASHLAND State PA Zip Code 17921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AB6AF60AEEA6544EB873
 Amount of Each Receipt this Period 20.00
 Memo Item

C. GRIEVE, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 COTTONTAIL LANE
 City WASHOE VALLEY State NV Zip Code 89704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCOURS BODY SHOP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 23 / 2021
Transaction ID : AB2C878F9B22742A7B40
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 822 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRIEVE, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 COTTONTAIL LANE
 City WASHOE VALLEY State NV Zip Code 89704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCOURS BODY SHOP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A167E60FEFAEE4376AC5
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GRIEVE, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 COTTONTAIL LANE
 City WASHOE VALLEY State NV Zip Code 89704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCOURS BODY SHOP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A06111169AF2E456B8C5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GRIFFIN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 CR 661
 City ABILENE State TX Zip Code 79606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A009EA3041A7A4B57AAB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 823 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRIFFIN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 CR 661

City ABILENE	State TX	Zip Code 79606
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021

Transaction ID : A4B5E17C3828E4B20905

Amount of Each Receipt this Period
50.00

Memo Item

B. GRIFFITH, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 LOCH LANE

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021

Transaction ID : A595F998FCCAD4F80943

Amount of Each Receipt this Period
25.00

Memo Item

C. GRIFFITH, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 LOCH LANE

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021

Transaction ID : A9D167EB62B084A29A55

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 824 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRIFFITH, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 LOCH LANE

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2021

Transaction ID : AE02BC93CD1A14D40A90

Amount of Each Receipt this Period
25.00

Memo Item

B. GRIFFITH, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 LOCH LANE

City NORTH LITTLE ROCK	State AR	Zip Code 72116
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2021

Transaction ID : A91FB45CDD4D14B4E8E6

Amount of Each Receipt this Period
50.00

Memo Item

C. GRIFFITH, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 LOCH LANE

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2021

Transaction ID : A93E86ECD37E64A3BA41

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 825 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRIFFITH, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 LOCH LANE

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A1B37D7A3FC2F41E78A8

Amount of Each Receipt this Period
50.00

Memo Item

B. GRIFFITH, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 LOCH LANE

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2021

Transaction ID : AFA825B412FF64D3F852

Amount of Each Receipt this Period
25.00

Memo Item

C. GRIGGS, BETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 KALMIA FOREST DRIVE

City AIKEN	State SC	Zip Code 29801
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : A20EE8C07973D4C6899E

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 826 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRINER, NAOMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 JAMAICA BLVD
 City LAKE HAVASU CITY State AZ Zip Code 86406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OWN CONSTRUCTION COMPANY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 03 / 2021
Transaction ID : A18CA3BCCB29D45F4ADf
 Amount of Each Receipt this Period 250.00
 Memo Item

B. GRISSOM, SPRING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 ABRAHAM DR
 City JACKSON State TN Zip Code 38305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHCARE PROCUREMENT SOLUTIONS Occupation (for Individual) BUSINESS DEVELOPMENT CONSUL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2021
Transaction ID : A7A747EF1F10C488485A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GRISSOM, SPRING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 ABRAHAM DR
 City JACKSON State TN Zip Code 38305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHCARE PROCUREMENT SOLUTIONS Occupation (for Individual) BUSINESS DEVELOPMENT CONSUL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 16 / 2021
Transaction ID : A3BEDB564B7A04474B71
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 827 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRISSOM, SPRING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 ABRAHAM DR
 City JACKSON State TN Zip Code 38305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHCARE PROCUREMENT SOLUTIONS Occupation (for Individual) BUSINESS DEVELOPMENT CONSUL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : ABDA1164767954C4BB37
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GRISSOM, SPRING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99 ABRAHAM DR
 City JACKSON State TN Zip Code 38305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHCARE PROCUREMENT SOLUTIONS Occupation (for Individual) BUSINESS DEVELOPMENT CONSUL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : AA1C0D9D875FE49888A6
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GROMALA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N 139 WEST DRIVE
 City MENOMINEE State MI Zip Code 49858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A333481F58B7944D6885
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 828 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GROMALA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N 139 WEST DRIVE

City MENOMINEE	State MI	Zip Code 49858
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 05 / 19 / 2021
Transaction ID : A610B8BEDC4CA4BF7AB1

Amount of Each Receipt this Period
 30.00

Memo Item

B. GROMALA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N 139 WEST DRIVE

City MENOMINEE	State MI	Zip Code 49858
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 290.00

Date of Receipt
 06 / 01 / 2021
Transaction ID : A1C3589202D774470BB0

Amount of Each Receipt this Period
 30.00

Memo Item

C. GROMALA, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N 139 WEST DRIVE

City MENOMINEE	State MI	Zip Code 49858
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 06 / 19 / 2021
Transaction ID : AA11985ECB8EC45EE9F6

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 829 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GROOME, HAROLD, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 484 S MAYA PALM DR
 City BOCA RATON State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 04 / 2021
Transaction ID : A927A8745BABB465588A
 Amount of Each Receipt this Period 500.00
 Memo Item

B. GRUPE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6838 COMSTOCK RD
 City COLLEGE GROVE State TN Zip Code 37046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 21 / 2021
Transaction ID : A0128ADEA928D4C008C4
 Amount of Each Receipt this Period 75.00
 Memo Item

C. GRUPE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6838 COMSTOCK RD
 City COLLEGE GROVE State TN Zip Code 37046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 21 / 2021
Transaction ID : AF51338C524074EB5825
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 830 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRUPE, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6838 COMSTOCK RD
 City COLLEGE GROVE State TN Zip Code 37046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : A9A95A20A78A14DF9879
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. GUALTIERI, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23332 GRACEWOOD CR.
 City LAND O LAKES State FL Zip Code 34639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A8983518E1A1F42679DF
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. GUANCI, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 CROSS LANE
 City BEVERLY State MA Zip Code 01915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : AAC57F1B510B64243862
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 831 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUANCI, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 CROSS LANE
 City BEVERLY State MA Zip Code 01915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : A1F2E01475D4D4E79870
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. GUCKERT, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CLINTON STREET
 City MALDEN State MA Zip Code 02148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIPER WOODWORKING CORP Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : ABAD9247D8A314D02935
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. GUELDPENFENIG, BRIGITTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 LAZY TRAIL
 City PENFIELD State NY Zip Code 14526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : AB3BDF985A73E47A5B4E
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 832 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUELDPENFENIG, BRIGITTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 LAZY TRAIL
 City PENFIELD State NY Zip Code 14526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AECA191A331F844EE884
 Amount of Each Receipt this Period 50.00
 Memo Item

B. GUERIN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 181 HILLSIDE TERRACE
 City KINGSTON State NY Zip Code 12401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : AF469E5C3B5D24336AB5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GUERRERO, MIGUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 SWALLOWS LANE
 City TRABUCO CANYON State CA Zip Code 92679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 14 / 2021
Transaction ID : AAB3A1F1A73A7494482A
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 833 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUILLEN, LINDA, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7956 UPPER OLALLA RD

City WINSTON	State OR	Zip Code 97496
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2021

Transaction ID : AE840C7DC04B4426ABB2

Amount of Each Receipt this Period
100.00

Memo Item

B. GUILLEN, LINDA, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7956 UPPER OLALLA RD

City WINSTON	State OR	Zip Code 97496
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2021

Transaction ID : A8947B093C2B6483FAA6

Amount of Each Receipt this Period
100.00

Memo Item

C. GUILLEN, LINDA, M., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7956 UPPER OLALLA RD

City WINSTON	State OR	Zip Code 97496
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2021

Transaction ID : AA31835CA43C34FDC94F

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 834 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUILLEN, LINDA, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7956 UPPER OLALLA RD
 City WINSTON State OR Zip Code 97496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 09 / 2021
Transaction ID : ADEA1043094744F4882D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GULL, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 SARONA CIRCLE
 City PALM DESERT State CA Zip Code 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A4A023F3D8682448E977
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GULL, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 SARONA CIRCLE
 City PALM DESERT State CA Zip Code 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AAFBF968069D54E61B6A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 835 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUNDERSEN, EDWARD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2176 COHWY 107

City AMSTERDAM	State NY	Zip Code 12010
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : A70D3E15F30894B95B40

Amount of Each Receipt this Period
50.00

Memo Item

B. GUNDERSEN, EDWARD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2176 COHWY 107

City AMSTERDAM	State NY	Zip Code 12010
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A2B762154FAFF49D089B

Amount of Each Receipt this Period
50.00

Memo Item

C. GUNDERSEN, EDWARD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2176 COHWY 107

City AMSTERDAM	State NY	Zip Code 12010
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AB7C1F835E288441EBB8

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 836 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUNDERSEN, EDWARD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2176 COHWY 107

City AMSTERDAM	State NY	Zip Code 12010
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00

Date of Receipt
06 / 18 / 2021
Transaction ID : A464344D490D7410491D
 Amount of Each Receipt this Period
50.00
 Memo Item

B. GWYN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 FAIRWAY OAKS LANE

City ISLE OF PALMS	State SC	Zip Code 29451
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

Date of Receipt
06 / 15 / 2021
Transaction ID : A92E7913699BF45AD80E
 Amount of Each Receipt this Period
35.00
 Memo Item

C. HAARER, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1145 COVEN CT

City THE VILLAGES	State FL	Zip Code 32163
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 205.00

Date of Receipt
04 / 26 / 2021
Transaction ID : A2F0CC7545EB0495CA9B
 Amount of Each Receipt this Period
50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 837 OF 3012 (check only one) [X] 11a 13 [] 11b 14 [] 11c 15 [] 12 16 [] 17

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NAME OF COMMITTEE (In Full) THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAASE, GREGORY, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address UPPER CHELSEA REACH City VIRGINIA BEACH State VA Zip Code 23454 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: [] Primary [] General [] Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 12 / 2021 Transaction ID : A30306AD7A96446FBA10 Amount of Each Receipt this Period 75.00 Memo Item

B. HAASE, GREGORY, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address UPPER CHELSEA REACH City VIRGINIA BEACH State VA Zip Code 23454 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: [] Primary [] General [] Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 19 / 2021 Transaction ID : AB0C9489F2A784200905 Amount of Each Receipt this Period 75.00 Memo Item

C. HAASE, GREGORY, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address UPPER CHELSEA REACH City VIRGINIA BEACH State VA Zip Code 23454 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED Receipt For: [] Primary [] General [] Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 12 / 2021 Transaction ID : A0764CB09FB144243AD9 Amount of Each Receipt this Period 75.00 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 225.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 838 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HAASE, GREGORY, , ,

Mailing Address **UPPER CHELSEA REACH**

City VIRGINIA BEACH	State VA	Zip Code 23454
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
03 / 19 / 2021

Transaction ID : A8C0B34D25AA34FE392E

Amount of Each Receipt this Period
75.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HAASE, GREGORY, , ,

Mailing Address **UPPER CHELSEA REACH**

City VIRGINIA BEACH	State VA	Zip Code 23454
-------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
04 / 01 / 2021

Transaction ID : ABB24CBC3D01845EAA7F

Amount of Each Receipt this Period
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HAASE, GREGORY, , ,

Mailing Address **UPPER CHELSEA REACH**

City VIRGINIA BEACH	State VA	Zip Code 23454
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
04 / 12 / 2021

Transaction ID : AEB10F3983AAB451AA5E

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 839 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAASE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UPPER CHELSEA REACH
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A369E72EAE9ED4BE88B9
 Amount of Each Receipt this Period 75.00
 Memo Item

B. HAASE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UPPER CHELSEA REACH
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 05 / 12 / 2021
Transaction ID : A250B0C5A99924499A31
 Amount of Each Receipt this Period 75.00
 Memo Item

C. HAASE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UPPER CHELSEA REACH
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A872296FA9EC44E0999F
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 840 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAASE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UPPER CHELSEA REACH
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 12 / 2021
Transaction ID : ACA226ADD364F409A977
 Amount of Each Receipt this Period 75.00
 Memo Item

B. HAASE, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address UPPER CHELSEA REACH
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 06 / 19 / 2021
Transaction ID : ACB0D6FE1732C42BF99C
 Amount of Each Receipt this Period 75.00
 Memo Item

C. HACKBARDT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2290 KEATON CHASE DR
 City FLEMING ISLAND State FL Zip Code 32003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WATSON REALTY CORP REALTORS Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A23CCEA4662A249AB99E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 841 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HACKER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 CROSSFIELD CIRCLE
 City NAPLES State FL Zip Code 34104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) YACHT CAPTAIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : A39122DCC31464F04AFF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HAHN, GEORGANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1998 S. MEMORY AE
 City PERU State IN Zip Code 46970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : A29CD619CE8BA430DAC8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HAHN, GEORGANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1998 S. MEMORY AE
 City PERU State IN Zip Code 46970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : A507CC1F0B3F846709D3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 842 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAISCHER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 FAIRVIEW
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALGREENS Occupation (for Individual) SERVICE CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A4C6458D0AFF949218AA
 Amount of Each Receipt this Period 25.00
 Memo Item

B. HAISCHER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 FAIRVIEW
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALGREENS Occupation (for Individual) SERVICE CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A2D90FD35A6044912AFC
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HAISCHER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 FAIRVIEW
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALGREENS Occupation (for Individual) SERVICE CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A798DA16B096C417F9FC
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 843 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAISCHER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 FAIRVIEW
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALGREENS Occupation (for Individual) SERVICE CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A756E1395AF44411A971
 Amount of Each Receipt this Period 25.00
 Memo Item

B. HALL, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 MARION RD
 City MATTAPOISETT State MA Zip Code 02739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHALLCO Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : AFC5A276CC3CFE48E1A45
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HALL, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 MARION RD
 City MATTAPOISETT State MA Zip Code 02739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WHALLCO Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A379B4F30CF6B40DE81A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 844 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HALL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6608 N. W. 116TH STREET
 City OKLAHOMA CITY State OK Zip Code 73162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2021
Transaction ID : AFC43DF29ED304452A76
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HALL, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6608 N. W. 116TH STREET
 City OKLAHOMA CITY State OK Zip Code 73162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 16 / 2021
Transaction ID : AD2612B131B3E4617B92
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HALL, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7065 WESTLAKE ROAD
 City STERLINGTON State LA Zip Code 71280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : AAE47AEEDD49447BB921
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 845 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HALL, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 SPIRIT CT
 City BLANDON State PA Zip Code 19510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANON MEDICAL SYSTEMS USA Occupation (for Individual) MEDICAL EQUIPMENT SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AD640B4BC37E44F18896
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HALL, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 57 SPIRIT CT
 City BLANDON State PA Zip Code 19510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANON MEDICAL SYSTEMS USA Occupation (for Individual) MEDICAL EQUIPMENT SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AAA0CCC894A654BE9A3D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HALL, OLLABELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3603 MEADOW LAKE LANE
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : AD552E865F0B04A73804
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 846 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HALL, OLLABELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3603 MEADOW LAKE LANE
 City HOUSTON State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A6442FD51039E451CBF9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HAMBLET, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 POWERS ROAD
 City MEREDITH State NH Zip Code 03253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A390C8587CFA34A0BAAC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HAMBLET, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 POWERS ROAD
 City MEREDITH State NH Zip Code 03253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A56B4C3CBCCDE47C8A37
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 847 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMEL, DAVID, A., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4260 INNSBROOK DR

City SNELLVILLE	State GA	Zip Code 30039
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2021

Transaction ID : ABBE870EDB8434478BD9

Amount of Each Receipt this Period
50.00

Memo Item

B. HAMEL, DAVID, A., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4260 INNSBROOK DR

City SNELLVILLE	State GA	Zip Code 30039
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2021

Transaction ID : AE1412B8684924CD9B50

Amount of Each Receipt this Period
35.00

Memo Item

C. HAMER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14405 W. YUKON DR.

City SUN CITY WEST	State AZ	Zip Code 85375
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2021

Transaction ID : A544448C732F941ADB54

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 848 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14405 W. YUKON DR.
 City SUN CITY WEST State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A2F216C1AEC97447E9DD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HAMILTON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 W CHESTER PIKE D-3
 City RIDLEY PARK State PA Zip Code 19078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AC938B18D6BFF4C96AA8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HAMILTON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 W CHESTER PIKE D-3
 City RIDLEY PARK State PA Zip Code 19078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A7B0E0ACA4D5249AC845
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 849 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMILTON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 W CHESTER PIKE
 D-3
 City RIDLEY PARK State PA Zip Code 19078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A08DA95AEE7924F2295A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HAMM, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6626 BRIARCOVE
 City DALLAS State TX Zip Code 75254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 01 / 2021
Transaction ID : A422F2CB9B0F44C49B83
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. HAMM, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6626 BRIARCOVE
 City DALLAS State TX Zip Code 75254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ORTHOPEDIC SURGEON
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2021
Transaction ID : A37F705EE076E466CA5B
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 850 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMMOND, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 BORDER LINKS DR
 City VISALIA State CA Zip Code 93291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **01 / 16 / 2021**
Transaction ID : AF54438567DE54ED083D
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. HAMMOND, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 BORDER LINKS DR
 City VISALIA State CA Zip Code 93291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 16 / 2021**
Transaction ID : A1A3E23FAC9844008B3A
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. HAMMOND, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9317S COLLEGE AVE 102
 City TULSA State OK Zip Code 74137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 04 / 2021**
Transaction ID : A2E9ABCAC1AA14307B47
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5050.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 851 OF 3012	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	11c	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	15	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMMOND, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9317S COLLEGE AVE
 102
 City TULSA State OK Zip Code 74137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A86CB8DC74E8C4BAC828
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HAMPTON, BERNADETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2869 SILVER RIDGE DR
 City PINON HILLS State CA Zip Code 92372-9573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A00ECAAE637384BCC95C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HAMPTON, DONETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8557 WILCREST DRIVE
 City HOUSTON State TX Zip Code 77099
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BOOKKEEPER/TAX PREPARER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A7CAE9F01DC874BF2816
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 852 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMRAC, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1471 TURNLAKE DRIVE
 City AUBURN State AL Zip Code 36830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPS Occupation (for Individual) OPERATIONS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : AB46965894C334C66AD3
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HAMRAC, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1471 TURNLAKE DRIVE
 City AUBURN State AL Zip Code 36830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPS Occupation (for Individual) OPERATIONS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : A5BBAEDC74F05450C825
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. HAMRAC, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1471 TURNLAKE DRIVE
 City AUBURN State AL Zip Code 36830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPS Occupation (for Individual) OPERATIONS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : AE600BD85535849848AB
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 853 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMRAC, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1471 TURNLAKE DRIVE
 City AUBURN State AL Zip Code 36830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPS Occupation (for Individual) OPERATIONS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A983A2D6135F747859A1
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HANA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 WEST LA HABRA BLVD.
 City LA HABRA State CA Zip Code 90631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 29 / 2021**
Transaction ID : ABB70CC05426344DE875
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HANA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 623 WEST LA HABRA BLVD.
 City LA HABRA State CA Zip Code 90631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 29 / 2021**
Transaction ID : A51319974FFC54712A6B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 854 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HANCOCK, JOLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 BRIDGEWATER CIRCLE
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A97D72214B6274A38BC8
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HANCOCK, KAROL, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 WILSON BOULEVARD SOUTHWEST
 City GLEN BURNIE State MD Zip Code 21061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A58EED33E18EC424DBCD
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. HANCOCK, VALLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3196 NE 8TH ST
 City POMPANO BEACH State FL Zip Code 33062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VALLEY HANCOCK Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : AAAC49175242342D7AF0
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 855 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HANEWALD, HERBERT, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3840 KNIGHTSEN AVE

City OAKLEY	State CA	Zip Code 94561
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARISIO HOME	Occupation (for Individual) CARE GIVER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021

Transaction ID : A45E991F4F4B042FE99B

Amount of Each Receipt this Period
35.00

Memo Item

B. HANEWALD, HERBERT, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3840 KNIGHTSEN AVE

City OAKLEY	State CA	Zip Code 94561
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARISIO HOME	Occupation (for Individual) CARE GIVER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021

Transaction ID : A4322AE6691FD498F962

Amount of Each Receipt this Period
35.00

Memo Item

C. HANEY, JUDITH, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 441 GINGERBREAD LN

City WAXAHACHIE	State TX	Zip Code 75165
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021

Transaction ID : A71AC16E32CDB4C17BAF

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 856 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HANIGAN, TOM, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1001
 City DOUGLAS State AZ Zip Code 85608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A5BD9D0924CF34F86A50
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. HANKS, CAROL, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 SO BRYANT BLVD
 City SAN ANGELO State TX Zip Code 76903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : AC3B8653AC7B44F38A43
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HANKS, CAROL, ANNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 SO BRYANT BLVD
 City SAN ANGELO State TX Zip Code 76903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : A6289B72D00864EEDBAB
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 857 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAN, KUAN, JUNG, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14420 E. VALLEY BLVD.
 City STATE Zip Code
 CITY OF INDUSTRY CA 91746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 ELITE SALON SERVICES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : A6CA6566072644AAFA66
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. HANNIBAL, SHELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6710 FERRARA ST
 City STATE Zip Code
 LOS ANGELES CA 90042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A85CB200471A342E9BDF
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. HANSEN, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13053 FELISA STREET
 28
 City STATE Zip Code
 MORENO VALLEY CA 92553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021
Transaction ID : A46C47FE12F4A45B5940
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 858 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANSEN, JERRY, , ,

Mailing Address 13053 FELISA STREET
28

City MORENO VALLEY State CA Zip Code 92553

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2021

Transaction ID : A2A6149C94F8245E0B55

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANSEN, JERRY, , ,

Mailing Address 13053 FELISA STREET
28

City MORENO VALLEY State CA Zip Code 92553

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2021

Transaction ID : A00A5CF6C1932472AB4A

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HANSEN, JERRY, , ,

Mailing Address 13053 FELISA STREET
28

City MORENO VALLEY State CA Zip Code 92553

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2021

Transaction ID : A4128B834FC0A4EE788E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 859 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HANSON, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 327 S. 24TH. ST. W. #5
 City BILLINGS State MT Zip Code 59102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SEWING CENTER WEST Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AAD3B6EAF63FB47BDB9/
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2021
Transaction ID : AE04990850EA2406C8C0
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A99EBE0CB63E3408AB8B
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 860 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : AEDFBEDD4D3584AAF9B1
 Amount of Each Receipt this Period 5.00
 Memo Item

B. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AE4B57565FBA841BE973
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AA442BCBBC35341A7A9A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 861 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A8F85B702F2DC4C949A0
 Amount of Each Receipt this Period 5.00
 Memo Item

B. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A19F70ACF773E431EBEF
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HANSON, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5918 HOLIDAY WAY
 City MINNETONKA State MN Zip Code 55345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AC06CBEEED0CE94C658B1
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 65.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 862 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARDEN, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19942 POTOMAC LN
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMARTLINK Occupation (for Individual) TELCOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AC57DB306E41A42CC856
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HARDEN, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19942 POTOMAC LN
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMARTLINK Occupation (for Individual) TELCOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A967324E607834F09BB9
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. HARDEN, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19942 POTOMAC LN
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMARTLINK Occupation (for Individual) TELCOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A29283835D6344C298FE
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 863 OF 3012				
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARDEN, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19942 POTOMAC LN
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMARTLINK Occupation (for Individual) TELCOM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AAFA8D8A9F7C140FFA8A
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HARDER, BRUCE, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1047 PORTUGAL DR
 City STAFFORD State VA Zip Code 22554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A2E4A6D585B044991823
 Amount of Each Receipt this Period 10.00
 Memo Item

C. HARDER, BRUCE, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1047 PORTUGAL DR
 City STAFFORD State VA Zip Code 22554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A86F0B6DE186A476DAE3
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 115.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 864 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARGROVE, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4812 ALDEN LAKE DR E
 City HORN LAKE State MS Zip Code 38637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AA8B071A89D6349A5B60
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HARKIN, GERARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 CUBBERLY PLACE
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ADD51D0EADF614D919CE
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HARMON, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 180359
 City CORONADO State CA Zip Code 92178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A4D6F68AE16E6431FA2C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 865 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARPER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 LOYOLA DRIVE
 City HOT SPRINGS VILLAGE State AR Zip Code 71909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A19231D10F1944621AE3
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HARPER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 LOYOLA DRIVE
 City HOT SPRINGS VILLAGE State AR Zip Code 71909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A67977EDC7B3E4726B5F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HARREL, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 424 14TH ST
 City BURLINGTON State CO Zip Code 80807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : AFE7707114AE74A23931
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 866 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARREL, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 424 14TH ST
 City BURLINGTON State CO Zip Code 80807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AAEE10EE685E43C1A51
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HARRELL, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1710 W SHIELDS DR
 City SHERMAN State TX Zip Code 75092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERMAN TX ISD Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A75811DDC369D4DAB863
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HARRELL, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1710 W SHIELDS DR
 City SHERMAN State TX Zip Code 75092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHERMAN TX ISD Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A6F7AF6F9A70D4BE0A52
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 867 OF 3012				
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
						<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARRISON, JOHN, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 CENTER POINT LANE
 City FLORENCE State AL Zip Code 35634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A09AEED67C62447059B7
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. HARRISON, LINDA, D., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 3RD ST
 City CLARKSTON State WA Zip Code 99403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A260D4241E42F4E13A53
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HARRISON, LINDA, D., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 3RD ST
 City CLARKSTON State WA Zip Code 99403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A698919E6166E4E4EB67
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 868 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARRISON, LUCILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5156 HARRISON PHELPS

City LA GRANGE	State NC	Zip Code 28551
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021

Transaction ID : A22E3C22E23CB4229A5C

Amount of Each Receipt this Period
50.00

Memo Item

B. HARRISON, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4213 GALEWOOD WAY

City CARMICHAEL	State CA	Zip Code 95608
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021

Transaction ID : ABB26A858DF734E6C9AC

Amount of Each Receipt this Period
35.00

Memo Item

C. HARRIS, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17031 WESTBURY RD

City BEAUMONT	State TX	Zip Code 77713
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021

Transaction ID : A02A9E316F7434CC4AA5

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 869 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2021

Transaction ID : A01D2C9F5E61C4C37BAE

Amount of Each Receipt this Period
35.00

Memo Item

B. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : ADDD037A8FD5B4420A8D

Amount of Each Receipt this Period
50.00

Memo Item

C. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : AF69966675E5743E49BA

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 870 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2021

Transaction ID : A8311F8203F394114AB0

Amount of Each Receipt this Period
50.00

Memo Item

B. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : A65DD7A40BF934571958

Amount of Each Receipt this Period
35.00

Memo Item

C. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2021

Transaction ID : AD39054B24F7C4307A1E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 871 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : AE829BCC6CEEA4EA79F1

Amount of Each Receipt this Period
35.00

Memo Item

B. HARTENBOWER, CATHERINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 323

City LOSTANT	State IL	Zip Code 61334
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HART ELECTRIC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : A78DB16F3C53244A993C

Amount of Each Receipt this Period
50.00

Memo Item

C. HARTRAMPF, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1672 HUNTINGDON TRAIL

City ATLANTA	State GA	Zip Code 30350
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2021

Transaction ID : A033AD055B3124A28B43

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 872 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARTRAMPF, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1672 HUNTINGDON TRAIL
 City ATLANTA State GA Zip Code 30350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ADC6CE33C02994D2C835
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HART, ROSILAND, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8636 NORTH LAGOON DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A6AA4DB0C368041D1A54
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HARTWICK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 SYDNEY ST
 City ROSWELL State NM Zip Code 88201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : AF558E008841C49FC89D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 873 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARTWICK, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 SYDNEY ST
 City ROSWELL State NM Zip Code 88201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A1B16BC0F22064C24854
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HATCHER, MAXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 34
 City CAVE CITY State KY Zip Code 42127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A46DBCDF7BD44F35BD9
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HATCHETT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2554 WINDMILL CT
 City MOBILE State AL Zip Code 36693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AD6FD3048A1294280846
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 874 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HATCHETT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2554 WINDMILL CT
 City MOBILE State AL Zip Code 36693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AD7AB8A9536AB41A8882
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HATFIELD, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2973 COUNTRY SPRING ROAD
 City LORENA State TX Zip Code 76655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRAZIER SPORTS Occupation (for Individual) WAREHOUSE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A57C3994856304A89B0A
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. HATFIELD, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2973 COUNTRY SPRING ROAD
 City LORENA State TX Zip Code 76655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRAZIER SPORTS Occupation (for Individual) WAREHOUSE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A1192D8BC614246A489F
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 875 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HATFIELD, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2973 COUNTRY SPRING ROAD
 City LORENA State TX Zip Code 76655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRAZIER SPORTS Occupation (for Individual) WAREHOUSE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AB8BE0E20A8DC4B7FAC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HAUGEN, DR NAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18361 VEZELAY LN
 City SAN DIEGO State CA Zip Code 92128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AE7FA3A8209E04A34B7D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HAUGEN, DR NAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18361 VEZELAY LN
 City SAN DIEGO State CA Zip Code 92128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AA730FF6A96BD4339821
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 876 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAUS, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 RAMSEY ST
 City CALIO State ND Zip Code 58352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021
Transaction ID : AF282B3ADA12C458BA7B
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HAUS, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 RAMSEY ST
 City CALIO State ND Zip Code 58352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : AB93FD3905E554975A2D
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HAUS, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 RAMSEY ST
 City CALIO State ND Zip Code 58352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A2DF7060B5AD5493F863
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 877 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAUS, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 RAMSEY ST
 City CALIO State ND Zip Code 58352
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A2124E8DEA1704FE9B30
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HAUSE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 ELYSIAN PLACE APT 138
 City CHESAPEAKE State VA Zip Code 23320
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A63C933955F9F47EFACC
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HAUSLADEN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23529 TAGUS AVE
 City HUTCHINSON State MN Zip Code 55350
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 11 / 2021
Transaction ID : AA17581F81ED042CD939
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 878 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAUSLADEN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23529 TAGUS AVE
 City HUTCHINSON State MN Zip Code 55350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AAE8BE8C0B2724781B1B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HAVERLY, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 ALISO ST
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAVERLY SYSTEMS INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 29 / 2021
Transaction ID : AA8BB38507C8D4343838
 Amount of Each Receipt this Period 300.00
 Memo Item

C. HAYES-FAVRE, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 MAIN ST
 City BAY SAINT LOUIS State MS Zip Code 39520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNS NY Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A228293499DD14138AF8
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 879 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAYES-FAVRE, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 MAIN ST
 City BAY SAINT LOUIS State MS Zip Code 39520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNS NY Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A2042FF7BB5604ED994A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HAYES-FAVRE, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 MAIN ST
 City BAY SAINT LOUIS State MS Zip Code 39520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNS NY Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ADE24010864834BF5BDD
 Amount of Each Receipt this Period 15.00
 Memo Item

C. HAYES-FAVRE, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 MAIN ST
 City BAY SAINT LOUIS State MS Zip Code 39520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VNS NY Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A27BED06D1CF4485F9A8
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 880 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAYMON, JUDY, B., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4693 MAIN ST
 City FYFFE State AL Zip Code 35971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 10 / 2021
Transaction ID : A9280AEC8DB6B4185BEB
 Amount of Each Receipt this Period 200.00
 Memo Item

B. HAYNES, CATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2423 GREGORY STREET
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A3E9E294163B2421A99A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HAYNES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 294 SEAWATCH
 City KURE BEACH State NC Zip Code 28449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2021
Transaction ID : AE78DF32E297C43D8AAB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 881 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAYNES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 294 SEAWATCH
 City KURE BEACH State NC Zip Code 28449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 22 / 2021
Transaction ID : AC05160895E934B1A83F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HAYNES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 294 SEAWATCH
 City KURE BEACH State NC Zip Code 28449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2021
Transaction ID : AC5FBC3F3DB984870B7D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HAYNES, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 294 SEAWATCH
 City KURE BEACH State NC Zip Code 28449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A957EB7AB80D74467BCA
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 882 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAYNIE, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8803 HIGHWAY 134

City ELBA	State AL	Zip Code 36323
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AC6FC72ED560C428AAD6

Amount of Each Receipt this Period
 35.00

Memo Item

B. HAYS, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 936 PURDUE RD

City CORPUS CHRISTI	State TX	Zip Code 78418
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2021
Transaction ID : A070660CC7A8A4DFF962

Amount of Each Receipt this Period
 25.00

Memo Item

C. HAYWOOD, DIANE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4603 HIGHWAY 62

City CORNING	State AR	Zip Code 72422
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2021
Transaction ID : AF44F87FB7D284EEBBEC

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 883 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAYWOOD, DIANE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4603 HIGHWAY 62
 City CORNING State AR Zip Code 72422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : A6174DD31FAB44AADAE
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HAYWOOD, DIANE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4603 HIGHWAY 62
 City CORNING State AR Zip Code 72422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : A26A71C95E48245FD8CF
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. HEADY, EVELYN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SUSAN DR
 City POUGHQUAG State NY Zip Code 12570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : A462F07BFB90C40079DF
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 884 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEADY, EVELYN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SUSAN DR
 City POUGHQUAG State NY Zip Code 12570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 04 / 06 / 2021
Transaction ID : AA6D60C2220794590AD8
 Amount of Each Receipt this Period 15.00
 Memo Item

B. HEADY, EVELYN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SUSAN DR
 City POUGHQUAG State NY Zip Code 12570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 29 / 2021
Transaction ID : A4E5B3D2C135C402C89E
 Amount of Each Receipt this Period 10.00
 Memo Item

C. HEADY, EVELYN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SUSAN DR
 City POUGHQUAG State NY Zip Code 12570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A9F2E33CCD63242B6A44
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 885 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HEADY, EVELYN, C, ,

Mailing Address 50 SUSAN DR

City POUGHQUAG State NY Zip Code 12570

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
05 / 06 / 2021
Transaction ID : AD400772AC6134EBABD8

Amount of Each Receipt this Period
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HEADY, EVELYN, C, ,

Mailing Address 50 SUSAN DR

City POUGHQUAG State NY Zip Code 12570

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
05 / 29 / 2021
Transaction ID : AD14CC9202AAA4923902

Amount of Each Receipt this Period
10.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HEADY, EVELYN, C, ,

Mailing Address 50 SUSAN DR

City POUGHQUAG State NY Zip Code 12570

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
06 / 01 / 2021
Transaction ID : A8F7CC88104AD4A64BC6

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 886 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEADY, EVELYN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SUSAN DR
 City POUGHQUAG State NY Zip Code 12570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : AD996605FD2BE42619B3
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. HEADY, EVELYN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SUSAN DR
 City POUGHQUAG State NY Zip Code 12570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A854653EE74824C9885A
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. HEATH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 LOMA DE ORO
 City SANTA FE State NM Zip Code 87506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAJARITO SCIENTIFIC CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A557A5EFDB5044744837
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 887 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEBERT, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 194 GRAND AVE
 City LAFAYETTE State LA Zip Code 70503-4637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AFDC17CC590804D3996E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HECKMAN, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 806 ORCHARD RD.
 City NIPOMO State CA Zip Code 93444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2021
Transaction ID : AF2C9046EF29E4F22A5F
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HEDGER, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 S NASH STREET
 City ENNIS State TX Zip Code 75119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLLINS AEROSPACE Occupation (for Individual) AIRCRAFT AVIONICS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AACFE763AC0514D128D3
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 888 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEGLER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3606 LEDGESTONE DRIVE

City HOUSTON	State TX	Zip Code 77059
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2021

Transaction ID : AE19C9A3B4A404009A81

Amount of Each Receipt this Period
35.00

Memo Item

B. HEIDEGGER, NIKOLAUS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19901 NORTHRIDGE RD

City CHATSWORTH	State CA	Zip Code 91311
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INFORMATION REQUESTED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2021

Transaction ID : AD73669086C4C4697B55

Amount of Each Receipt this Period
100.00

Memo Item

C. HEIDEGGER, NIKOLAUS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19901 NORTHRIDGE RD

City CHATSWORTH	State CA	Zip Code 91311
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INFORMATION REQUESTED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2021

Transaction ID : A27DBEE7E26DE47BB9A4

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 889 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEIDEGGER, NIKOLAUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19901 NORTHRIDGE RD
 City CHATSWORTH State CA Zip Code 91311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2021
Transaction ID : AE1940F00671B429C895
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HEIDERICH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W154N8167 VALLEY VIEW DR
 City MENOMONEE FALLS State WI Zip Code 53051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A07FD9DF661AE46A0BD0
 Amount of Each Receipt this Period 20.00
 Memo Item

C. HEILMAN, LAMONT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 CIRCLE DRIVE
 City SUN PRAIRIE State WI Zip Code 53590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 10 / 2021
Transaction ID : A9E4BFA7556EA4F64B6A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 890 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEILMAN, LAMONT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 CIRCLE DRIVE
 City SUN PRAIRIE State WI Zip Code 53590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 10 / 2021
Transaction ID : A69EF0F2472994044A2C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HEILMAN, LAMONT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 CIRCLE DRIVE
 City SUN PRAIRIE State WI Zip Code 53590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A121775B093704B86808
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HEILMAN, LAMONT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1385 CIRCLE DRIVE
 City SUN PRAIRIE State WI Zip Code 53590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AC36DFBA156AB432098A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 891 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 04 / 24 / 2021
Transaction ID : AA2793789FE9C49B9879
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 04 / 24 / 2021
Transaction ID : A849F6E1CD4804C4F83C
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 04 / 28 / 2021
Transaction ID : A9D2F6B76E29A4C6E9E0
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 892 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A81E5E1E3AFA04619BF5
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 05 / 24 / 2021
Transaction ID : AE30EE81D3D094938827
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 05 / 24 / 2021
Transaction ID : ABBB4BCDC1B8047D98C0
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 893 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 INDIANTOWN ROAD

City GLENMOORE	State PA	Zip Code 19343
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EVERSANA	Occupation (for Individual) BUSINESS ANALYST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2021

Transaction ID : A75CD8E9CEB1B431D9BE

Amount of Each Receipt this Period
50.00

Memo Item

B. HEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 INDIANTOWN ROAD

City GLENMOORE	State PA	Zip Code 19343
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EVERSANA	Occupation (for Individual) BUSINESS ANALYST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : A6DE8E6D013F3415AAE0

Amount of Each Receipt this Period
50.00

Memo Item

C. HEIN, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 INDIANTOWN ROAD

City GLENMOORE	State PA	Zip Code 19343
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EVERSANA	Occupation (for Individual) BUSINESS ANALYST
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
765.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2021

Transaction ID : A6A82D0BCCD81424C93C

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 894 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AA37065B9A4694D8CA3F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HEIN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 INDIANTOWN ROAD
 City GLENMOORE State PA Zip Code 19343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSANA Occupation (for Individual) BUSINESS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AE67715136DC94CBE848
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HELLAND, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1375 BARR
 City OXFORD State MI Zip Code 48370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A15BF24E993254EF5BCA
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 895 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HENDRICKS, EARNESTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2549 W LAKE VAN NESS CIRCLE
 City FRESNO State CA Zip Code 93711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **03 / 16 / 2021**
Transaction ID : AD2D34B20AE1B4371B21
 Amount of Each Receipt this Period 200.00
 Memo Item

B. HENRY, FORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13485 HIDE AWAY LANE
 City DEWITT State MI Zip Code 48820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 21 / 2021**
Transaction ID : ACEFC97DFC04E46A8B89
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HENSELER, R ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 PERRY STREET
 City MORRISTOWN State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : A3A2484E5EFC340B78DC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 896 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HENSELER, R ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 PERRY STREET
 City MORRISTOWN State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : AD332C46D4EFE46EFBC9
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. HENSELER, R ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 PERRY STREET
 City MORRISTOWN State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AE17724E22D674BB2929
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. HENSLEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3917 CR 4660
 City WINNSBORO State TX Zip Code 75494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICK MERRITT STEEL CONSTRUCTION/OUTBAC Occupation (for Individual) WELDER/CONSTRUCTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A6C984BB0ADC44400ADA
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 897 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HENSLEY, MICHAEL, , ,

Mailing Address 3917 CR 4660

City WINNSBORO	State TX	Zip Code 75494
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICK MERRITT STEEL CONSTRUCTION/OUTBAC	Occupation (for Individual) WELDER/CONSTRUCTION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : AE061B305E7F143D88E1

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HENSLEY, MICHAEL, , ,

Mailing Address 3917 CR 4660

City WINNSBORO	State TX	Zip Code 75494
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICK MERRITT STEEL CONSTRUCTION/OUTBAC	Occupation (for Individual) WELDER/CONSTRUCTION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : A35BDBA9C24E140158C0

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HENSLEY, MICHAEL, , ,

Mailing Address 3917 CR 4660

City WINNSBORO	State TX	Zip Code 75494
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICK MERRITT STEEL CONSTRUCTION/OUTBAC	Occupation (for Individual) WELDER/CONSTRUCTION
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : AC8312BD3C0414557AAA

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 898 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HENSLEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3917 CR 4660
 City WINNSBORO State TX Zip Code 75494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICK MERRITT STEEL CONSTRUCTION/OUTBAC Occupation (for Individual) WELDER/CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AABCFB650BEA5466C8E/
 Amount of Each Receipt this Period 25.00
 Memo Item

B. HENSLEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3917 CR 4660
 City WINNSBORO State TX Zip Code 75494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICK MERRITT STEEL CONSTRUCTION/OUTBAC Occupation (for Individual) WELDER/CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AD4D8462D6D914B3CB27
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HENSON, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4025 BECKWOOD DR.
 City SAN ANTONIO State TX Zip Code 78259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A759B7A93A0934B35880
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 899 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HENSON, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4025 BECKWOOD DR.
 City SAN ANTONIO State TX Zip Code 78259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A17546CC1412840BEAE5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HERIEGEL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8196 WOODRIDGE PT DR
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 17 / 2021
Transaction ID : A84546EA7FCED40F1801
 Amount of Each Receipt this Period 200.00
 Memo Item

C. HERIEGEL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8196 WOODRIDGE PT DR
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A78DD52D30491469F9F5
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 900 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERIEGEL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8196 WOODRIDGE PT DR
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : AD7644104EB164C17865
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. HERIEGEL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8196 WOODRIDGE PT DR
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A1FA62FE57B4A4D4C923
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. HERIEGEL, MERTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8196 WOODRIDGE PT DR
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A7FF8295BCB2E421B849
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 901 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERMAN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4797 S GLORIA VISTA DR
 City GREEN VALLEY State AZ Zip Code 85622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A3F24E40730D54FD786A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HERMAN, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4797 S GLORIA VISTA DR
 City GREEN VALLEY State AZ Zip Code 85622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A354CA7DD0C8041269BC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HERNANDEZ, ELOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 CUARZO ST
 City EDINBURG State TX Zip Code 78539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2021
Transaction ID : ADFEF2274CFB14822832
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 902 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERNANDEZ, ELOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 CUARZO ST
 City EDINBURG State TX Zip Code 78539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A38AA73AD85474B7A89F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HEROIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 KIM DR.
 City LAFAYETTE State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : ACC707854DEB14FEFA04
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HEROIN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 KIM DR.
 City LAFAYETTE State LA Zip Code 70503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AC9BE84D7D364438FB26
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 903 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERON, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3490 FIDDLEHEAD COURT

City BONITA SPRINGS	State FL	Zip Code 34134
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : AFA8D180F926F495C8B4

Amount of Each Receipt this Period
50.00

Memo Item

B. HERON, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3490 FIDDLEHEAD COURT

City BONITA SPRINGS	State FL	Zip Code 34134
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : A47C242F00FEC40B0915

Amount of Each Receipt this Period
50.00

Memo Item

C. HERRICK, ALICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 EAST BLUE HILL RD

City BLUE HILL	State ME	Zip Code 04614
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2021

Transaction ID : A4E9B61A5BB5241B181D

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 904 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERRICK, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 702 EAST BLUE HILL RD
 City BLUE HILL State ME Zip Code 04614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 20 / 2021**
Transaction ID : A549A9B9C0D3A479DA61
 Amount of Each Receipt this Period 250.00
 Memo Item

B. HERRICK, CAROLINE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 FALLS BRIDGE ROAD
 City BLUE HILL State ME Zip Code 04614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : AE0CCC48BA0F34ACC9DC
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HERRICK, CAROLINE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 FALLS BRIDGE ROAD
 City BLUE HILL State ME Zip Code 04614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **04 / 25 / 2021**
Transaction ID : AFB3F4CCC1D9D4267BFA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 905 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERRICK, CAROLINE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 FALLS BRIDGE ROAD
 City BLUE HILL State ME Zip Code 04614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021
Transaction ID : AA588A17A02174186A10
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HERRICK, CAROLINE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 FALLS BRIDGE ROAD
 City BLUE HILL State ME Zip Code 04614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A6CD420B4C0A14A7A9F8
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HERRICK, CAROLINE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 FALLS BRIDGE ROAD
 City BLUE HILL State ME Zip Code 04614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : A6AE61CCA0AB34D88BDE
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 906 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERRICK, CAROLINE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 FALLS BRIDGE ROAD
 City BLUE HILL State ME Zip Code 04614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AA28CC306DFC44301A13
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HERRICK, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 PONDS CT
 City METAMORA State IL Zip Code 61548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A681BCAE7F20B41AD80B
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HERR, PAUL, N., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 WILLOW VALLEY SQ
 APT D 128
 City LANCASTER State PA Zip Code 17602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A7693A1203FCD4646887
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 907 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERR, PAUL, N., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 WILLOW VALLEY SQ
APT D 128

City LANCASTER State PA Zip Code 17602

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
05 / 27 / 2021
Transaction ID : **A3E44FAD1A0E84B8E981**

Amount of Each Receipt this Period
400.00

Memo Item

B. HERZOG, JANICE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2620 CADET WAY

City EVERETT State WA Zip Code 98208

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 03 / 2021
Transaction ID : **AF118C09E0C114E159ED**

Amount of Each Receipt this Period
50.00

Memo Item

C. HERZOG, JANICE, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2620 CADET WAY

City EVERETT State WA Zip Code 98208

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 25 / 2021
Transaction ID : **A66869D14F7024635BCD**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 908 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERZOG, JANICE, M., ,

Mailing Address 2620 CADET WAY

City EVERETT	State WA	Zip Code 98208
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2021

Transaction ID : ACFFA7102EB304893890

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERZOG, JANICE, M., ,

Mailing Address 2620 CADET WAY

City EVERETT	State WA	Zip Code 98208
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021

Transaction ID : AC656E4E88E444D22A2C

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HERZOG, JANICE, M., ,

Mailing Address 2620 CADET WAY

City EVERETT	State WA	Zip Code 98208
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021

Transaction ID : AC0777078BCE8452795B

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 909 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HESLIN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31345 SUNNINGDALE DR.

City TEMECULA	State CA	Zip Code 92591
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2021

Transaction ID : A3F4C9988DBBF4F2D85B

Amount of Each Receipt this Period
35.00

Memo Item

B. HESSER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1417 EQUESTRIAN DRIVE

City HENDERSON	State NV	Zip Code 89002
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRASFIELD & GORRIE CONST. CO	Occupation (for Individual) SR. SUPERINTENDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2021

Transaction ID : A9BEE6C536EA24939B83

Amount of Each Receipt this Period
50.00

Memo Item

C. HESSER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1417 EQUESTRIAN DRIVE

City HENDERSON	State NV	Zip Code 89002
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRASFIELD & GORRIE CONST. CO	Occupation (for Individual) SR. SUPERINTENDENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2021

Transaction ID : AE42217AA77DD44E3B33

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 910 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HESS, NAOMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 MOONRAKER DR
 City SLIDELL State LA Zip Code 70458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2021
Transaction ID : AFB588440E8A4B0D9A1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HESS, NAOMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 MOONRAKER DR
 City SLIDELL State LA Zip Code 70458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2021
Transaction ID : A9BCA769E3131409093E
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. HESS, NAOMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 MOONRAKER DR
 City SLIDELL State LA Zip Code 70458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : ADC0359F8F30947E8B84
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 911 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HESS, NAOMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 MOONRAKER DR
 City SLIDELL State LA Zip Code 70458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : A40A358AB24714BB6B44
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HEWITT, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28353 PARAGON DR
 City SANTA CLARITA State CA Zip Code 91390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A9FE1C233B36D4537998
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HEWITT, JONATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28353 PARAGON DR
 City SANTA CLARITA State CA Zip Code 91390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A6F9F376A7F6F40E4B5B
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 912 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEYDT, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7892 EAST ROSELAND DRIVE
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A9294CF2588BF4F62AD0
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HICKERESON, SHAWNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 EAGLE RIDGE RD NE
 City ALBUQUERQUE State NM Zip Code 87122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A8BB7A82C028941A3AA0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HICKERESON, SHAWNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1545 EAGLE RIDGE RD NE
 City ALBUQUERQUE State NM Zip Code 87122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AE3837C3345D347B080A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 913 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HICKEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1579 IRVING RD
 City THAXTON State VA Zip Code 24174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : AFF058642C0C94D8BA29
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HICKEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1579 IRVING RD
 City THAXTON State VA Zip Code 24174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A6B61C2839DA743B6964
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HICKEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1579 IRVING RD
 City THAXTON State VA Zip Code 24174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AE420B44276914160961
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 914 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HICKMAN, WANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11904 MONTCLAIR BEND
 City AUSTIN State TX Zip Code 78732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A519B76E7611A42AE9F4
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HICKMAN, WANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11904 MONTCLAIR BEND
 City AUSTIN State TX Zip Code 78732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A1C05E1B7ED444EF5BE7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HICKS, PEGGY, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2497 ZION RD
 City TROY State VA Zip Code 22974
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A6FD311C7DCE44F738BF
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 915 OF 3012				
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16
						<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HICKS, PEGGY, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2497 ZION RD
 City TROY State VA Zip Code 22974
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 08 / 2021
Transaction ID : A6BE027DC9D184B2FB13
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIDALGO, ALBERTO, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16424 LAKE CHURCH DR
 City ODESSA State FL Zip Code 33556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 15 / 2021
Transaction ID : A52B8903DDFA44A52AE4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HIGASHIDE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 ALEXANDER ST APT. 603
 City HONOLULU State HI Zip Code 96826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 02 / 26 / 2021
Transaction ID : A0F4658ABFB454CFE8FB
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 916 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIGASHIDE, JAMES, , ,

Mailing Address 1226 ALEXANDER ST APT. 603

City HONOLULU State HI Zip Code 96826

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 03 / 16 / 2021
Transaction ID : A8D45FC6B95784670B5A

Amount of Each Receipt this Period
 50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIGASHIDE, JAMES, , ,

Mailing Address 1226 ALEXANDER ST APT. 603

City HONOLULU State HI Zip Code 96826

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 03 / 26 / 2021
Transaction ID : A77BF717B767E429E827

Amount of Each Receipt this Period
 10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIGASHIDE, JAMES, , ,

Mailing Address 1226 ALEXANDER ST APT. 603

City HONOLULU State HI Zip Code 96826

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 04 / 16 / 2021
Transaction ID : A22D8DB2C6AE84418812

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 917 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIGASHIDE, JAMES, , ,

Mailing Address 1226 ALEXANDER ST APT. 603

City HONOLULU	State HI	Zip Code 96826
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2021

Transaction ID : AC09CEB6E8CDA4106822

Amount of Each Receipt this Period
10.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIGASHIDE, JAMES, , ,

Mailing Address 1226 ALEXANDER ST APT. 603

City HONOLULU	State HI	Zip Code 96826
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : AC0A5CC347C7948CE96C

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HIGASHIDE, JAMES, , ,

Mailing Address 1226 ALEXANDER ST APT. 603

City HONOLULU	State HI	Zip Code 96826
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : A0FD3FB53185044DBA5C

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 918 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 07 / 2021
Transaction ID : A3B0F3DDE23C845C092D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 18 / 2021
Transaction ID : A9276B167A3BE4DFFB4D
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A7F52368FF8D84918870
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 919 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **04 / 07 / 2021**
Transaction ID : A04449C2C4A69493E8B0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : AED72E6B6D2D3475CB18
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A27E994BB22EC4DDB84A
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 920 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 07 / 2021
Transaction ID : AEDDB717E1A654080BDB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A551D4707FD8D43C8811
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW YORK CITY POLICE PENSION FUND Occupation (for Individual) ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A3A81B2CBCC394A0894E
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 921 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW YORK CITY POLICE PENSION FUND ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : AB6FF9D78693348F8A0F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HIGGINS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 10TH STREET
 City STATEN ISLAND State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NEW YORK CITY POLICE PENSION FUND ASSOCIATE RETIREMENT BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A3A13A42510844971BAB
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. HIGHTOWER, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1492 BING DR
 City SAN JOSE State CA Zip Code 95129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AD34EAAE82D2F4A2BBE5
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 922 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIGHTOWER, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1492 BING DR
 City SAN JOSE State CA Zip Code 95129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ACCB9B9A81995492899E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIGHTS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 247 SUMMERFORD
 City SAN RAMON State CA Zip Code 94583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERSPECTA Occupation (for Individual) SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A3569912B03D646A7B0F
 Amount of Each Receipt this Period 15.00
 Memo Item

C. HIGHTS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 247 SUMMERFORD
 City SAN RAMON State CA Zip Code 94583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERSPECTA Occupation (for Individual) SYSTEMS ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A33F9F71EBC6B451D9D2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 923 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIGHTS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 247 SUMMERFORD

City SAN RAMON	State CA	Zip Code 94583
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PERSPECTA	Occupation (for Individual) SYSTEMS ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A291C88B7B7AA4F43A7A

Amount of Each Receipt this Period
15.00

Memo Item

B. HIGHTS, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 247 SUMMERFORD

City SAN RAMON	State CA	Zip Code 94583
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PERSPECTA	Occupation (for Individual) SYSTEMS ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2021

Transaction ID : ABD0110FFA0C74E35B04

Amount of Each Receipt this Period
35.00

Memo Item

C. HILL, DORIS, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 SALLY WILLIS RD

City VICKSBURG	State MS	Zip Code 39183
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2021

Transaction ID : A226FE40AC99F4020820

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 924 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HILL, EDDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 CO RD 233

City NEW BROCKTON	State AL	Zip Code 36351
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A9139C87E995647DBB2E

Amount of Each Receipt this Period
 50.00

Memo Item

B. HILL, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4403 NW118TH CIRCLE

City VANCOUVER	State WA	Zip Code 98685
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMESTREET BANK	Occupation (for Individual) MORTGAGE BANKING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2021
Transaction ID : A2534CDE5C3694363B04

Amount of Each Receipt this Period
 100.00

Memo Item

C. HILLS, NEWTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 790 SILVER

City ELKO	State NV	Zip Code 89801
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A6B65A7FE49364F0B878

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 925 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HILLS, NEWTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 790 SILVER
 City ELKO State NV Zip Code 89801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : A3DEC48DCCC3D4FF0A0/
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIMMELREICH, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3833 BADEN DR.
 City HOLIDAY State FL Zip Code 34691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : AFE23B4C9B458483C8B0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HIMMELREICH, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3833 BADEN DR.
 City HOLIDAY State FL Zip Code 34691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 15 / 2021**
Transaction ID : ADAC177D216E3495EB58
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 926 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIMME, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 STRAUSS TERRACE
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) TRAVEL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A90E8811860DE45DF905
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIMME, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 STRAUSS TERRACE
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) TRAVEL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A82D82B67E9084E14A35
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HINKEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 HICKORY POINT
 City MC CORMICK State SC Zip Code 29835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A98A46689938B4EDAAF4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 927 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HINKLE, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 GOLDEN OAKS DRIVE

City COUNCIL BLUFFS	State IA	Zip Code 51503
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GOETZE DENTAL	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2021

Transaction ID : A39B51E66C1B4468D93D

Amount of Each Receipt this Period
100.00

Memo Item

B. HINKLE, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 GOLDEN OAKS DRIVE

City COUNCIL BLUFFS	State IA	Zip Code 51503
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GOETZE DENTAL	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2021

Transaction ID : A8FEC36BDD03D4CD89E6

Amount of Each Receipt this Period
100.00

Memo Item

C. HINKLE, JUSTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 GOLDEN OAKS DRIVE

City COUNCIL BLUFFS	State IA	Zip Code 51503
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GOETZE DENTAL	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2021

Transaction ID : AFA67A46EECD94E08BA7

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 928 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HINKLE, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 GOLDEN OAKS DRIVE
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOETZE DENTAL Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A57FA9CC30F554CF18C4
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HINNANT, MARY BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 630
 City ORANGE GROVE State TX Zip Code 78372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2021
Transaction ID : A128419B0E1804EF1B59
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HIRES, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 WINDSOR PKWY
 City ATLANTA State GA Zip Code 30342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSTRUCTION RESOURCES Occupation (for Individual) VP OF SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2021
Transaction ID : A69835E7A92B8482B85F
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 929 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIRES, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 WINDSOR PKWY
 City ATLANTA State GA Zip Code 30342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSTRUCTION RESOURCES Occupation (for Individual) VP OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2021
Transaction ID : AE916646545B74F9181E
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HIRES, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 WINDSOR PKWY
 City ATLANTA State GA Zip Code 30342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSTRUCTION RESOURCES Occupation (for Individual) VP OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021
Transaction ID : A6394616ED59C4E9B9E0
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. HIRES, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 WINDSOR PKWY
 City ATLANTA State GA Zip Code 30342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSTRUCTION RESOURCES Occupation (for Individual) VP OF SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : A02CA29BBE410410C8BE
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 930 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HIRSCH, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2221 E WINSTON ROAD, SUITE A
 City ANAHEIM State CA Zip Code 92806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIRSCH & ASSOCIATES, INC Occupation (for Individual) LANDSCAPE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A3CA35DC47B5F4A02802
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HIRSCH, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2221 E WINSTON ROAD, SUITE A
 City ANAHEIM State CA Zip Code 92806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIRSCH & ASSOCIATES, INC Occupation (for Individual) LANDSCAPE ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A14334D93902748DDB91
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HISER, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 HAWKE WOODS RD
 City HENDERSONVILLE State NC Zip Code 28792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A644CEF5E2E414554BFE
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 931 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HISER, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 HAWKE WOODS RD
 City HENDERSONVILLE State NC Zip Code 28792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 14 / 2021
Transaction ID : ACD2231889EFE4DBD92C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HNARAKIS, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40632 WATERVIEW DR
 City MECHANICSVILLE State MD Zip Code 20659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FAA Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AFBDDFD0766694D73BA8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 26 / 2021
Transaction ID : AAFB6D6BF3B2D445C8D8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 932 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : A80B3966C1EAC4A34A8E
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : ACEF2300810854C6388F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A7590939F95CC4E4C875
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 933 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A8C06D370E2FE429AB83
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A028E5A28E83C4128ACA
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AE7B770BDE9544F29B70
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 934 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOBBS, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 698 SW RASBERRY COURT FORT
 City FORT WHITE State FL Zip Code 32038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A7E25E84C2AA04EA09A7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HOEHN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4341 VAN ATTA ROAD
 City OKEMOS State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHIGAN STATE UNIVERSITY Occupation (for Individual) PROFESSOR OF ECONOMICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : AE3C58F6A750142D989E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HOEHN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4341 VAN ATTA ROAD
 City OKEMOS State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHIGAN STATE UNIVERSITY Occupation (for Individual) PROFESSOR OF ECONOMICS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 02 / 2021
Transaction ID : AA388E6E8BC8E470B9A3
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 935 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOEHN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4341 VAN ATTA ROAD
 City OKEMOS State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHIGAN STATE UNIVERSITY Occupation (for Individual) PROFESSOR OF ECONOMICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : AC67ED2C5BAE24FF8BB4
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HOETZEL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 COTSWOLD CIRCLE
 City DAVENPORT State FL Zip Code 33837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XPO Occupation (for Individual) TRACTOR TRAILER DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : A486277E477434A06903
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HOETZEL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 COTSWOLD CIRCLE
 City DAVENPORT State FL Zip Code 33837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XPO Occupation (for Individual) TRACTOR TRAILER DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A4C3134947CC642F2BE2
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 936 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOETZEL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 COTSWOLD CIRCLE
 City DAVENPORT State FL Zip Code 33837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XPO Occupation (for Individual) TRACTOR TRAILER DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A86AC08B6105C419BA5B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOFFMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23871 VIA SEGOVIA
 City MURRIETA State CA Zip Code 92562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AYA Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A977BECE0FEB34F2CA02
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOFFMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23871 VIA SEGOVIA
 City MURRIETA State CA Zip Code 92562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AYA Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A9B5AFBF424FC42EF977
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 937 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOFFMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23871 VIA SEGOVIA

City MURRIETA	State CA	Zip Code 92562
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AYA	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 04 / 01 / 2021
Transaction ID : A44456907A2BF4D4A8D3

Amount of Each Receipt this Period
50.00

Memo Item

B. HOFFMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23871 VIA SEGOVIA

City MURRIETA	State CA	Zip Code 92562
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AYA	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 04 / 24 / 2021
Transaction ID : A8D5852BC49BD4F46BA6

Amount of Each Receipt this Period
50.00

Memo Item

C. HOFFMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23871 VIA SEGOVIA

City MURRIETA	State CA	Zip Code 92562
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AYA	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 05 / 01 / 2021
Transaction ID : A26249CAFD2D34A89A99

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 938 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOFFMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23871 VIA SEGOVIA
 City MURRIETA State CA Zip Code 92562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AYA Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A70F3D7335C904A7E9C4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOFFMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23871 VIA SEGOVIA
 City MURRIETA State CA Zip Code 92562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AYA Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AB0A7EF394298402F8E9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOFFMAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1854 W CAPE COD WAY
 City LITTLETON State CO Zip Code 80122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2021
Transaction ID : AEB5FBBC80EEC4CF2B46
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 939 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOFFMAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1854 W CAPE COD WAY
 City LITTLETON State CO Zip Code 80122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AC9C2CDEFB6ED484499A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOFFMAN, COLLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5740 STEWART ST
 City RED LEVEL State AL Zip Code 36474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : ABF63A086D24D49708FE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOFFMAN, COLLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5740 STEWART ST
 City RED LEVEL State AL Zip Code 36474
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PLUMBING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A48CFA28F53874E34847
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 940 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOFFMAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10561 HAWKS LANDING TER
 City WEST PALM BEACH State FL Zip Code 33412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A6E68AD602E8442549CC
 Amount of Each Receipt this Period 250.00
 Memo Item

B. HOFFMAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10561 HAWKS LANDING TER
 City WEST PALM BEACH State FL Zip Code 33412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : AFDCCC3A4D4724726B27
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HOFFMANN, MANFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3161 HUNTER PLACE
 City WEST COVINA State CA Zip Code 91791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **04 / 16 / 2021**
Transaction ID : A495789F052084D39A05
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 941 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOFFMANN, MANFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3161 HUNTER PLACE
 City WEST COVINA State CA Zip Code 91791
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 05 / 16 / 2021
Transaction ID : AA05A39EAF3B04ADCB35
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOFFMANN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 CALENDAR BROOK RD
 City SUTTON State VT Zip Code 05867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A729E0AF0A55645AD835
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HOFFMANN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3402 CALENDAR BROOK RD
 City SUTTON State VT Zip Code 05867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AA91A5411FD2F458EAD8
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 942 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOFFSOMMER, MONTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 902 JACKSON DR
 City LIBERTY State MO Zip Code 64068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRIBUTES SOFTWARE INV Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A6ECBA20365974808899
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOFFSOMMER, MONTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 902 JACKSON DR
 City LIBERTY State MO Zip Code 64068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRIBUTES SOFTWARE INV Occupation (for Individual) PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A4D79624026C84E2AB28
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOGUE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11394 EAST IDA AVE
 City ENGLEWOOD State CO Zip Code 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIECURE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : AF102846184BC43EC948
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 943 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOGUE, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11394 EAST IDA AVE
 City ENGLEWOOD State CO Zip Code 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VIECURE Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A2D34B064CAF6424B8A7
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : A827EACC6B9AC4E1DB86
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AA67E0D212F384EA391F
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 944 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOILES, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 DOWNS AVENUE

City STAMFORD	State CT	Zip Code 06902
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2021

Transaction ID : ABB6E16755D5D4115BE6

Amount of Each Receipt this Period
25.00

Memo Item

B. HOILES, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 DOWNS AVENUE

City STAMFORD	State CT	Zip Code 06902
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2021

Transaction ID : AB1D95FFBC5DC45F088A

Amount of Each Receipt this Period
35.00

Memo Item

C. HOILES, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 DOWNS AVENUE

City STAMFORD	State CT	Zip Code 06902
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2021

Transaction ID : A4D29209C045A4D59A3F

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 945 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A519BD7738F8C43AF92E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A86D649A2C40345D38F9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 05 / 02 / 2021
Transaction ID : AAEF505644A9948E8A03
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 946 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AA421359BC88B4DA8920
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A3C0FDFA14781426DBE0
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. HOILES, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 141 DOWNS AVENUE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A038F822868FB4B49A4C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 947 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOLLANDER, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 GROVE ISLE DRIVE
 UNIT 1206
 City MIAMI State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AD29C5BC261FD427480E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HOLLAND, PAMELA, DENESE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 BYRON NELSON
 City SAN ANTONIO State TX Zip Code 78257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CRNA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A25C863E1662844FFBFE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOLLAND, PAMELA, DENESE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 BYRON NELSON
 City SAN ANTONIO State TX Zip Code 78257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CRNA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AD60EE57EFA804669829
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 948 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HOLLAR, RANDY, , ,

Mailing Address 6517 LADYBANK CT W

City CLEBURNE	State TX	Zip Code 76033
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CPA - CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021

Transaction ID : ADD8420228B244BFCAAB

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HOLLAR, RANDY, , ,

Mailing Address 6517 LADYBANK CT W

City CLEBURNE	State TX	Zip Code 76033
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CPA - CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021

Transaction ID : A25BB7EDA295B4856A8E

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HOLLIMAN, KATIE, , ,

Mailing Address 7719 NIGHT HAWK

City CHATTANOOGA	State TN	Zip Code 37421
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021

Transaction ID : A7290885C6CA344449EC

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 949 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOLT, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3738 CHERRYWOOD CT
 City ROCHESTER HILLS State MI Zip Code 48309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AD8F4D4106F534443B8E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HOLT, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6297 S RUDDSDALE AVE
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRINGBOK Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AC39DF34AACAE403A9C3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOLT, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 PLATT RD
 City FITZGERALD State GA Zip Code 31750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AD31AD998D5784F02B8E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 950 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOLT, RANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 388 PLATT RD

City FITZGERALD	State GA	Zip Code 31750
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : A02BBC8778B5A4B8B93F

Amount of Each Receipt this Period
50.00

Memo Item

B. HOLT, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1140 PORTOBELLO RD

City BIRMINGHAM	State AL	Zip Code 35242
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2021

Transaction ID : A170CB2F155FD471D9CB

Amount of Each Receipt this Period
35.00

Memo Item

C. HOMAN, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 GLENFIELD DR.

City BEAVER	State PA	Zip Code 15009
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : A10356243814D47529F9

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 951 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOMME, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4250
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENT CONTRACTOOR Occupation (for Individual) TRAVEL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2021
Transaction ID : AE6062640EAE54E44AE6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HOMME, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4250
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENT CONTRACTOOR Occupation (for Individual) TRAVEL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 23 / 2021
Transaction ID : A15B0206B30614901985
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HOMME, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4250
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENT CONTRACTOOR Occupation (for Individual) TRAVEL CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A749E3EAC5A584F5BBC4
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 952 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOMME, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 4250

City RANCHO MIRAGE	State CA	Zip Code 92270
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INDEPENDENT CONTRACTOOR	Occupation (for Individual) TRAVEL CONSULTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 06 / 23 / 2021
Transaction ID : A43EE019122E44B9FB87

Amount of Each Receipt this Period
 100.00

Memo Item

B. HONAKER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3429 W BRIARWOOD RD

City MONROVIA	State IN	Zip Code 46157
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ODFL	Occupation (for Individual) DRIVER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 06 / 18 / 2021
Transaction ID : A95AEDA72BB3C490A91D

Amount of Each Receipt this Period
 35.00

Memo Item

C. HONEYCUTT, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 JOSH WAY

City SAINT LEONARD	State MD	Zip Code 20685
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) H2 APPRAISAL
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 14 / 2021
Transaction ID : A281D77F3236B4FE49CB

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 953 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HONEYCUTT, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 JOSH WAY
 City SAINT LEONARD State MD Zip Code 20685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) H2 APPRAISAL
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A5527B1270FF64483A63
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOOKS, AUDREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 PRIVATE ROAD 3150
 City GILMER State TX Zip Code 75644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : A9C6A7E94F2C645D99D7
 Amount of Each Receipt this Period 150.00
 Memo Item

C. HOOPER, NAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1160 WESTBURY DR
 City ANCHORAGE State AK Zip Code 99503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt **04 / 19 / 2021**
Transaction ID : A754767EC9BD448FE96C
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 954 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOOVER, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12820 MANDARIN RD
 City JACKSONVILLE State FL Zip Code 32223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LMHC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A2349C30F2988442FB20
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. HOOVER, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12820 MANDARIN RD
 City JACKSONVILLE State FL Zip Code 32223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LMHC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : ACD2E864539854491A7F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HOPPER, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5016 ACADEMY
 City HOUSTON State TX Zip Code 77005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A10FEC947D59046CF8A1
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 955 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOPSON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 927 ASHWORTH ROAD SUITE 309
 City WEST DES MOINES State IA Zip Code 50265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A573580C5E1DF491685B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HORCHER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 KINGSLAND CT
 City ST JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A7F786B949F164986849
 Amount of Each Receipt this Period 20.00
 Memo Item

C. HORCHER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 KINGSLAND CT
 City ST JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 22 / 2021
Transaction ID : AC84D94D281C7455EBCC
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 956 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HORCHER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 KINGSLAND CT
 City ST JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : A1E9B583B32DF4367897
 Amount of Each Receipt this Period 20.00
 Memo Item

B. HORCHER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 KINGSLAND CT
 City ST JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A706C316057014B6D94E
 Amount of Each Receipt this Period 20.00
 Memo Item

C. HORCHER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 KINGSLAND CT
 City ST JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 26 / 2021**
Transaction ID : A6787E5DFD0304ADF951
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 957 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HORCHER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 KINGSLAND CT
 City ST JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : A14326C41228643B5B77
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. HORCHER, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 KINGSLAND CT
 City ST JOHNS State FL Zip Code 32259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A2633D676013D45A4B1D
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. HORD, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 LOCH NESS RD
 City SAN ANGELO State TX Zip Code 76901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A5330873207C048E4A59
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 958 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HORNE, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6712 S KEARNEY CT
 City CENTENNIAL State CO Zip Code 80112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A26B7CFA668514160A87
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HOSEPHROS, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 BROOKSIDE DRIVE
 City FEASTERVILLE TREVOSE State PA Zip Code 19053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AF95F39C0ABAB404EB73
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HOTTEL, BERRY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 986
 City BELLA VISTA State CA Zip Code 96008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A6326E5FC18C340E7A63
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 959 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOTTEL, BERRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 986

City BELLA VISTA	State CA	Zip Code 96008
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : A5C37723707A141F7A28

Amount of Each Receipt this Period
50.00

Memo Item

B. HOUSER, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11011 WEST 54TH AVE

City ARVADA	State CO	Zip Code 80002
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2021

Transaction ID : A6DE8CCC3B46F4CFEAA2

Amount of Each Receipt this Period
50.00

Memo Item

C. HOUSER, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11011 WEST 54TH AVE

City ARVADA	State CO	Zip Code 80002
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2021

Transaction ID : A18C552AFE7A345308E3

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 960 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOUSER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11011 WEST 54TH AVE
 City ARVADA State CO Zip Code 80002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : AD1E33F6A81EF415FBE4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HOUSER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11011 WEST 54TH AVE
 City ARVADA State CO Zip Code 80002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A33D9BF693823483EBDF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HOUSER, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11011 WEST 54TH AVE
 City ARVADA State CO Zip Code 80002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : ADA67D48792A8427B8D6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 961 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOUSTON, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6747 ELMHURST AVE
 City RANCHO CUCAMONGA State CA Zip Code 91701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : ADD6AB71D24224B5EBA2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HOVAN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16344 RTE 187
 City TOWANDA State PA Zip Code 18848-7940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : A0F194A5004D44ED6A04
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HOWARD, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4500 GLENWOOD RD EXT
 City WILMER State AL Zip Code 36587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SSQC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 10 / 2021**
Transaction ID : A4A4EFBD8F651402FBAD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 962 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOWARD, NORMAN, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 820
 35884 OASIS ST

City YERMO State CA Zip Code 92398

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SALES REP/INDEPENDENT Occupation (for Individual) INDEPENDENT SALES REP AND TEC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 235.00

Date of Receipt
 06 / 01 / 2021
Transaction ID : AE043AFD822F14AA2865

Amount of Each Receipt this Period
 60.00

Memo Item

B. HOWELL, DAVID, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 784 DEVONSHIRE BLVD

City BRIGHTON State MI Zip Code 48116

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 02 / 03 / 2021
Transaction ID : AD82785188821476D8C8

Amount of Each Receipt this Period
 300.00

Memo Item

C. HOWELL, DAVID, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 784 DEVONSHIRE BLVD

City BRIGHTON State MI Zip Code 48116

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 02 / 09 / 2021
Transaction ID : A5E537E8C983549E984B

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 385.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 963 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOWELL, DAVID, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 784 DEVONSHIRE BLVD
 City BRIGHTON State MI Zip Code 48116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : ADD17138A48614B9FBB3
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. HSU, ALETHEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 S SAN GABRIEL BLVD
 203
 City SAN GABRIEL State CA Zip Code 91776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A30DFB75E6E94469CA05
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HUBER, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2712 BIG OAK RD
 City GLADE VALLEY State NC Zip Code 28627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : A6F0D0B27527F48BEAA4
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 964 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUCHTON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1401 PASEO DE VACA STREET

City SAN ANGELO	State TX	Zip Code 76901
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHANNON CLINIC	Occupation (for Individual) MD
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : A6D553D069DB640E19A4

Amount of Each Receipt this Period
35.00

Memo Item

B. HUDOCK, JEANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4916 SW LAKE GROVE CIRCLE

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2021

Transaction ID : A15E8A6094B84485C8D8

Amount of Each Receipt this Period
50.00

Memo Item

C. HUDSON, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 137 DAVID MCMANNIS RD

City MONTGOMERY	State LA	Zip Code 71454
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A2ED83080053F4A3CB1B

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 965 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUDSON, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20094 WOODCREST DR.
 City REDDING State CA Zip Code 96002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A1725384BAD194F8CB8F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HUFFMAN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2880 HIGHWAY 81
 City FALL BRANCH State TN Zip Code 37656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A3D0006CE2CE446B1B2C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HULLIHEN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 PERSIMMON DR
 City COLLEGEVILLE State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED BIOSOURCE Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A14E8CAE53E3D4F0CBCC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

120.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 966 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HULLIHEN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 PERSIMMON DR
 City COLLEGEVILLE State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED BIOSOURCE Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A8E6F331A9E544E23BFA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HULSEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1084 SPRUCE CREEK LANE
 City LAWRENCEVILLE State GA Zip Code 30045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADE CONSTRUCTION CONSULTANTS, INC Occupation (for Individual) CONSTRUCTION COST ESTIMATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 04 / 2021
Transaction ID : AD6A0D60849CE4EDEB0D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HULSEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1084 SPRUCE CREEK LANE
 City LAWRENCEVILLE State GA Zip Code 30045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADE CONSTRUCTION CONSULTANTS, INC Occupation (for Individual) CONSTRUCTION COST ESTIMATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 04 / 2021
Transaction ID : A3CBCC7F20F1945EBAF0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 967 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUMBER, DURIE, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 SPANISH OAK CV
 City SAINT SIMONS ISLAND State GA Zip Code 31522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AE5CA0E5495D94F019BF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HUNT, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 JOHN MATTHEW ROAD
 City HOPKINTON State MA Zip Code 01748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A471DB8749314437C9D8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HUNT, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 LONE OAK WAY
 City FAIRMOUNT State GA Zip Code 30139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHSIDE PROPERTIES Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A7D615B1FB43D4A26BF7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 968 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A4024016776E6443889F
 Amount of Each Receipt this Period 25.00
 Memo Item

B. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2021
Transaction ID : ACAF0D402CB0C454E8FE
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 27 / 2021
Transaction ID : AA0001C0439D84BB0B96
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 969 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUOT, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1767 S SUNLIT SAND PL

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : ADD2CB59F136F4B0F9F0

Amount of Each Receipt this Period
35.00

Memo Item

B. HUOT, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1767 S SUNLIT SAND PL

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2021

Transaction ID : AF3D7A94989CD41B3882

Amount of Each Receipt this Period
25.00

Memo Item

C. HUOT, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1767 S SUNLIT SAND PL

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2021

Transaction ID : A06A29B66D17C4F69B95

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 970 OF 3012				
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
						<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : AF3BB6FD1366B44819C4
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : A157D460A42A04A1D968
 Amount of Each Receipt this Period 10.00
 Memo Item

C. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A808ABD2E59194D4D994
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 971 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AEDC2427726EB4C85A79
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 05 / 12 / 2021
Transaction ID : A91DA8617C40E4F6588C
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A1D78E76266224731BB2
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 972 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A2EAE014FEDD492D90C
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : ABC43DD82FF964B2CBB6
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A291469757F4A4281BFF
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 973 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A5840DFC1B1D043199FE
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021
Transaction ID : A184F525E34B243C88C3
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. HUOT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1767 S SUNLIT SAND PL
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A85847C9778B04C1D9A2
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 974 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUOT, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1767 S SUNLIT SAND PL

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2021

Transaction ID : AB4DC09FF199E4C579A2

Amount of Each Receipt this Period
35.00

Memo Item

B. HUOT, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1767 S SUNLIT SAND PL

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2021

Transaction ID : A1FB746E706A14D118F8

Amount of Each Receipt this Period
10.00

Memo Item

C. HUOT, RAYMOND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1767 S SUNLIT SAND PL

City TUCSON	State AZ	Zip Code 85748
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2021

Transaction ID : AA4DB71B4F613480FBC2

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 975 OF 3012	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	11c	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	15	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HURITE, FRANCIS, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 N GRANDVIEW DR
 City PITTSBURGH State PA Zip Code 15215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 12 / 2021
Transaction ID : AFE0946D788D94B31BF3
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HURITE, FRANCIS, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 N GRANDVIEW DR
 City PITTSBURGH State PA Zip Code 15215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AF461D19C30AC44EA8F0
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HURLBURT, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 CARRIAGE CREEK LANE
 City FRIENDSWOOD State TX Zip Code 77546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2021
Transaction ID : AE845F386EACD46EA83B
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 320.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 976 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HURLBURT, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 CARRIAGE CREEK LANE

City FRIENDSWOOD	State TX	Zip Code 77546
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

Transaction ID : AC6294C1997C647CA99F

Amount of Each Receipt this Period
250.00

Memo Item

B. HURLBURT, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 CARRIAGE CREEK LANE

City FRIENDSWOOD	State TX	Zip Code 77546
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2021

Transaction ID : A501B9733B0804B098AA

Amount of Each Receipt this Period
250.00

Memo Item

C. HURLBURT, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 CARRIAGE CREEK LANE

City FRIENDSWOOD	State TX	Zip Code 77546
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2021

Transaction ID : A1A6A3528A4534521A65

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 977 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HURLBURT, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 CARRIAGE CREEK LANE

City FRIENDSWOOD	State TX	Zip Code 77546
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : A52D17D2B06A64067A3C

Amount of Each Receipt this Period
250.00

Memo Item

B. HURLBURT, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 CARRIAGE CREEK LANE

City FRIENDSWOOD	State TX	Zip Code 77546
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : AAC905ED8E6BB48338EB

Amount of Each Receipt this Period
250.00

Memo Item

C. HURLEY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 345 WALNUT LANE

City SAINT PAUL	State MN	Zip Code 55124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2021

Transaction ID : A389BF036310148F19A2

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 978 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HURLEY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 345 WALNUT LANE

City SAINT PAUL	State MN	Zip Code 55124
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2021

Transaction ID : ABA9943D6DBDE4F98BC5

Amount of Each Receipt this Period
50.00

Memo Item

B. HURLEY, PHYLLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 310 LINDA DRIVE

City CLINTON	State MS	Zip Code 39056
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2021

Transaction ID : A8E21B61A98934365B02

Amount of Each Receipt this Period
35.00

Memo Item

C. HUSTON, JUDITH, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 COUNTRYSIDE LN
APT. 306

City CADIZ	State OH	Zip Code 43907
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1030.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	04	/	2021

Transaction ID : A6438F10ECD48429DA6C

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1085.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 979 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUSTON, JUDITH, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 COUNTRYSIDE LN
 APT. 306
 City CADIZ State OH Zip Code 43907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AA05541BEF81344688D4
 Amount of Each Receipt this Period 10.00
 Memo Item

B. HUSTON, JUDITH, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 COUNTRYSIDE LN
 APT. 306
 City CADIZ State OH Zip Code 43907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AAB2EE4D0275D4D58866
 Amount of Each Receipt this Period 10.00
 Memo Item

C. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 08 / 2021
Transaction ID : A94CC6E6076A248F9BAD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 980 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 02 / 25 / 2021
Transaction ID : A162BF5A242184463BC5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 02 / 28 / 2021
Transaction ID : AF69D81E1C3344551B2F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A078DA6583E404E518E3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 981 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : AEFD3E5F390314CADB4A
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : A80D24EF0B60B4F44B28
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : A7CE7E897FF69446EA27
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 982 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 04 / 25 / 2021
Transaction ID : ADE2F803BB4A144D5979
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A56A0914A95B24DA2B5A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HUTCHISON, FREDRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 W SPECKLED TROUT
 City ROCKPORT State TX Zip Code 78382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt 05 / 25 / 2021
Transaction ID : AA408EE8E03B94B158C8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 983 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUTCHISON, FREDRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 W SPECKLED TROUT

City ROCKPORT	State TX	Zip Code 78382
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
705.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : A7FCF891951B440EA99F

Amount of Each Receipt this Period
50.00

Memo Item

B. HUTCHISON, FREDRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 W SPECKLED TROUT

City ROCKPORT	State TX	Zip Code 78382
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2021

Transaction ID : A77060168204744D18A1

Amount of Each Receipt this Period
50.00

Memo Item

C. HUTCHISON, FREDRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 W SPECKLED TROUT

City ROCKPORT	State TX	Zip Code 78382
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
805.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : AB80863170A3D434A874

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 984 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUU, ENG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 TRILLIUM
 City HATTIESBURG State MS Zip Code 39402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIAM CAREY UNIVERSITY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AA5130D947E49442C90D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. HWANG, WENSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 755
 City PALOS VERDES ESTATES State CA Zip Code 90274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A3D6C615D8354455EB88
 Amount of Each Receipt this Period 35.00
 Memo Item

C. HYDOCK, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 FOUNDERS WAY
 City QUEENSBURY State NY Zip Code 12804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OVERHEAD DOOR CO.OF GLENS FALLS, INC. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2021
Transaction ID : A0AB769DE042A4931AD4
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 985 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HYDOCK, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 FOUNDERS WAY
 City QUEENSBURY State NY Zip Code 12804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OVERHEAD DOOR CO.OF GLENS FALLS, INC. Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AC7EA65C6566C4A79941
 Amount of Each Receipt this Period 50.00
 Memo Item

B. IGNAS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5704 HEGERMAN ST
 City PHILADELPHIA State PA Zip Code 19135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOVERNMENT EMPLOYEE Occupation (for Individual) CIVIL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : AE9BDE66F6C8041C98DE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. IGNAS, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5704 HEGERMAN ST
 City PHILADELPHIA State PA Zip Code 19135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOVERNMENT EMPLOYEE Occupation (for Individual) CIVIL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AE6BE861F8A1741429F3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 986 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ILG, NANCY, , ,

Mailing Address 3618 CLOVER MEADOW DRIVE

City GARLAND	State TX	Zip Code 75043
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2021

Transaction ID : A405D139273F5420FB14

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ILG, NANCY, , ,

Mailing Address 3618 CLOVER MEADOW DRIVE

City GARLAND	State TX	Zip Code 75043
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2021

Transaction ID : A0E654752492E4065868

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ILG, NANCY, , ,

Mailing Address 3618 CLOVER MEADOW DRIVE

City GARLAND	State TX	Zip Code 75043
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : AFDD09238D06949FCBA8

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 987 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ILG, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3618 CLOVER MEADOW DRIVE
 City GARLAND State TX Zip Code 75043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AD6D974C5A1194B869B4
 Amount of Each Receipt this Period 25.00
 Memo Item

B. IMBODEN, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 FALCON DRIVE E
 City HIGHLAND State IL Zip Code 62249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2021
Transaction ID : A3403264F68CD45FCAC5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. IMBODEN, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 FALCON DRIVE E
 City HIGHLAND State IL Zip Code 62249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 12 / 2021
Transaction ID : A584F20FD060B45A19F1
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 988 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. IMBODEN, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 FALCON DRIVE E
 City HIGHLAND State IL Zip Code 62249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : A66CEE64F39204469BEB
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. IMBODEN, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 FALCON DRIVE E
 City HIGHLAND State IL Zip Code 62249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021
Transaction ID : A0C81658F36DA45408DC
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. IMMEL, JUDIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1622 S E 46TH AVE, UNIT B
 City PORTLAND State OR Zip Code 97215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A9A30A069AC6E4A0EB6A
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 989 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. INGERSOLL, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14331 CLEAR CRK
 City SAN ANTONIO State TX Zip Code 78232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A14A8D92553204BC99A2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. INGLE, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 HARVARD DR
 City BARTLESVILLE State OK Zip Code 74006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A6B006C6C98104794BEB
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. INGLE, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 HARVARD DR
 City BARTLESVILLE State OK Zip Code 74006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A93FAE38D3F324B1DACA
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 990 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. INMAN, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8501 DEERWOOD FOREST DRIVE
 City FORT WORTH State TX Zip Code 76126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIVING HOPE MINISTRIES Occupation (for Individual) CHRISTIAN MINISTRY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A4376BC15B3D347D69DD
 Amount of Each Receipt this Period 35.00
 Memo Item

B. INMAN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 RIVER BLUFF LANE
 City CARMICHAEL State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A6452BFE9E57C4F9A869
 Amount of Each Receipt this Period 25.00
 Memo Item

C. INMAN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 RIVER BLUFF LANE
 City CARMICHAEL State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AA70E50CEBE36443A84E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 991 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. INTRIERI, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 BISCAYNE BLVD
 2001
 City MIAMI State FL Zip Code 33132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VDA CAPITAL MANAGMENT LLC Occupation (for Individual) FOUNDER / CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AEF9CC5C2DFC04108970
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. IVAN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3735 HEDGECLIFF
 City ALPHARETTA State GA Zip Code 30022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : ADFF95E13B53B491CB93
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. IVAN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3735 HEDGECLIFF
 City ALPHARETTA State GA Zip Code 30022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : A3B9F391137A54A038A4
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 992 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. IVEY, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14501 ALAMEDA AVENUE

City CLINT	State TX	Zip Code 79836
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : AD5480AEE1C3A48ABAE

Amount of Each Receipt this Period
50.00

Memo Item

B. IVEY, JOANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14501 ALAMEDA AVENUE

City CLINT	State TX	Zip Code 79836
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Transaction ID : A2401B6BC7A624047B38

Amount of Each Receipt this Period
50.00

Memo Item

C. IZQUIERDO, CARLOS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10678 JONES RD

City HOUSTON	State TX	Zip Code 77065
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) BAYOU CITY CO. LLC
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2021

Transaction ID : A18DF4EDA98B748F486D

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 993 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
IZQUIERDO, CARLOS, , ,

Mailing Address 10678 JONES RD

City HOUSTON	State TX	Zip Code 77065
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) BAYOU CITY CO. LLC
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2021

Transaction ID : A28473B2B5F7A44EEA17

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
IZQUIERDO, CARLOS, , ,

Mailing Address 10678 JONES RD

City HOUSTON	State TX	Zip Code 77065
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) BAYOU CITY CO. LLC
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2021

Transaction ID : A05746B90D4D64509870

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
IZQUIERDO, CARLOS, , ,

Mailing Address 10678 JONES RD

City HOUSTON	State TX	Zip Code 77065
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) BAYOU CITY CO. LLC
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2021

Transaction ID : AF064A95A0DE947D59CD

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 994 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JACK, ROBERT, W., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 6TH AVE

City SANTA CRUZ	State CA	Zip Code 95062
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2021

Transaction ID : A45C84A304A71446AA3D

Amount of Each Receipt this Period
300.00

Memo Item

B. JACKSON, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 331

City ASHBURNHAM	State MA	Zip Code 01430
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHESHIRE MEDICAL CENTER	Occupation (for Individual) MEDICAL ASSISTANT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2021

Transaction ID : A7DCB882494B7431A99D

Amount of Each Receipt this Period
35.00

Memo Item

C. JACOBSEN, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2229 VIA FERNANDEZ

City PALOS VERDES PENINSULA	State CA	Zip Code 90274
--------------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2021

Transaction ID : A2A602BDF385E4BFCA8C

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 995 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JACOBSON, JIEMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1227 INNSBROOK CT.
 City ANN ARBOR State MI Zip Code 48108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHILDRENS CREATIVE LEARNING CENTER Occupation (for Individual) EARLY CHILDHOOD EEDUCATOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 21 / 2021**
Transaction ID : A5FE3D5BE367D4BCDA7E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JACOBS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 PALM AVE
 City MIAMI BEACH State FL Zip Code 33139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUNGLE ISLAND Occupation (for Individual) VIP ANIMAL TOUR GUIDE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : AF931B460C0654168BFB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JACOBS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 PALM AVE
 City MIAMI BEACH State FL Zip Code 33139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JUNGLE ISLAND Occupation (for Individual) VIP ANIMAL TOUR GUIDE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : ACA83184E951E427FBBD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 996 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JADLOWSKI, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5875 S 77TH ST
 City OMAHA State NE Zip Code 68127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID WOOD FLOORS, INC. Occupation (for Individual) WOOD FLOOR SANDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : A10481C47704741D28CF
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JAEGER, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 243
 City DURANGO State CO Zip Code 81302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERMOUNTAIN WALL SYSTEMS INC. Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 21 / 2021**
Transaction ID : A77197DA926DE475AAB7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. JAMES, CHRISTOPHER, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 510
 City CHALLIS State ID Zip Code 83226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : A4B4119F90D5E4D6AA14
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	635.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 997 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JAMES, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17155 COUNTY ROAD 605
 City FARMERSVILLE State TX Zip Code 75442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : A061C602EB5C9427D86C
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. JAMES, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17155 COUNTY ROAD 605
 City FARMERSVILLE State TX Zip Code 75442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : A250C20171ECF41B08F1
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. JAMES, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17155 COUNTY ROAD 605
 City FARMERSVILLE State TX Zip Code 75442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A79A014D548C44641AA7
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 998 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JAMES, PATRICK, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 CHATEAU RIDGE ROAD

City CASTLE ROCK	State CO	Zip Code 80108-8424
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2021

Transaction ID : A0393AFA5B154486F991

Amount of Each Receipt this Period
50.00

Memo Item

B. JAMES, PATRICK, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 CHATEAU RIDGE ROAD

City CASTLE ROCK	State CO	Zip Code 80108-8424
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : AA70E7F7B5A664EBB90A

Amount of Each Receipt this Period
50.00

Memo Item

C. JAMES, PATRICK, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 CHATEAU RIDGE ROAD

City CASTLE ROCK	State CO	Zip Code 80108-8424
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2021

Transaction ID : A750BF4CD3F25409D92A

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 999 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JAMES, PATRICK, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4335 CHATEAU RIDGE ROAD
 City CASTLE ROCK State CO Zip Code 80108-8424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A7A0A69809F3142D9B2E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. JAMES, PATRICK, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4335 CHATEAU RIDGE ROAD
 City CASTLE ROCK State CO Zip Code 80108-8424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : ADA88E8E8866149B3A62
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. JAMES, PATRICK, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4335 CHATEAU RIDGE ROAD
 City CASTLE ROCK State CO Zip Code 80108-8424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A0F1EC1C27B924304996
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1000 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JAMES, PATRICK, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4335 CHATEAU RIDGE ROAD
 City CASTLE ROCK State CO Zip Code 80108-8424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A4FB0954545A449D7BFE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JAMES, PATRICK, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4335 CHATEAU RIDGE ROAD
 City CASTLE ROCK State CO Zip Code 80108-8424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A84F6872076904DA8AED
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JAMISON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 FRANKLIN RD NE
 City MASSILLON State OH Zip Code 44646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PART TIME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AE0E339A4572C424DB32
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1001 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JAMISON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 FRANKLIN RD NE
 City MASSILLON State OH Zip Code 44646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PART TIME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AA0F5DF72B9BA4DFD9AE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JANKE, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4475 COUNTY ROAD 2509
 City ROYSE CITY State TX Zip Code 75189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AF558AB9E3B0B45CC805
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JANKE, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4475 COUNTY ROAD 2509
 City ROYSE CITY State TX Zip Code 75189
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A5AF97D9326B4465A97A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1002 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JANKOWSKI, SCOTT, , ,

Mailing Address W325N7128 CLEARWATER DRIVE

City HARTLAND	State WI	Zip Code 53029
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DK SALES, INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2021

Transaction ID : AA98DDC82D66B4169887

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JANKOWSKI, SCOTT, , ,

Mailing Address W325N7128 CLEARWATER DRIVE

City HARTLAND	State WI	Zip Code 53029
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DK SALES, INC	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

Transaction ID : AAACEC53C98FE40888FC

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JANSEN-GUADAGNI, MARGARET, , ,

Mailing Address 1384 EAST 34 STREET
PH

City BROOKLYN	State NY	Zip Code 11210
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2021

Transaction ID : A25FDC2FDA7484662A27

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1003 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JANSEN-GUADAGNI, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1384 EAST 34 STREET
 PH
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : A4137B1D7D3DE479BA7C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JANSEN-GUADAGNI, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1384 EAST 34 STREET
 PH
 City BROOKLYN State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **06 / 10 / 2021**
Transaction ID : A30F527EFC5D14D29AC0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JAQUISH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5720 NORTH W ST
 City PENSACOLA State FL Zip Code 32505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST CHOICE AUTOMOTIVE Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : A3948B45D87084538A7C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1004 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JAQUISH, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5720 NORTH W ST
 City PENSACOLA State FL Zip Code 32505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST CHOICE AUTOMOTIVE Occupation (for Individual) AUTO DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A9484D37E371F4FE9922
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JARCCIK, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5705
 City INCLINE VILLAGE State NV Zip Code 89450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAL-NEVADA INSURANCE AGENYC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 10 / 2021**
Transaction ID : A7D615946AE694CEBAA3
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JARCCIK, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 5705
 City INCLINE VILLAGE State NV Zip Code 89450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAL-NEVADA INSURANCE AGENYC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : A820388E5451644CD9B9
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1005 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JARCCIK, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 5705

City INCLINE VILLAGE	State NV	Zip Code 89450
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAL-NEVADA INSURANCE AGENYC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2021

Transaction ID : AFCDB7F76EDF94070BB4

Amount of Each Receipt this Period
100.00

Memo Item

B. JARCCIK, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 5705

City INCLINE VILLAGE	State NV	Zip Code 89450
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAL-NEVADA INSURANCE AGENYC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2021

Transaction ID : A6EB1EE65EF104637A16

Amount of Each Receipt this Period
100.00

Memo Item

C. JARRELL, ALBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3915 S ATLANTIC AVE

City PORT ORANGE	State FL	Zip Code 32127
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A98A754D72DE34B05BE4

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1006 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JARRELL, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3915 S ATLANTIC AVE
 City PORT ORANGE State FL Zip Code 32127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A79B731A7E0AD4420B02
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JAYSON, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TORCH VIEW DR
 City KEWADIN State MI Zip Code 49648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PONEMON INSTITUTE Occupation (for Individual) RESEARCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 04 / 2021
Transaction ID : AB9F7C936DC1D41229E7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JAYSON, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 TORCH VIEW DR
 City KEWADIN State MI Zip Code 49648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PONEMON INSTITUTE Occupation (for Individual) RESEARCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 04 / 2021
Transaction ID : A5CC67FC837184FCE95C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1007 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JELORMINE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7667 MARTINO CIRCLE
 City NAPLES State FL Zip Code 34111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A03242CA9D68745948D7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JENKINS, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4342 RUSTIC ROAD
 City CARMICHAEL State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2021
Transaction ID : AB853069675C047CDAD6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JENKINS, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4342 RUSTIC ROAD
 City CARMICHAEL State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A66A1B1ECFC0842C7841
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1008 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JENKINS, RACHEL, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4303, HWY 490 RD
 City MACON State MS Zip Code 39341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROGRESSIVE THERAPY SOLUTIONS Occupation (for Individual) PHYSICAL THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A0C56E8B9B904447A8B1
 Amount of Each Receipt this Period 35.00
 Memo Item

B. JENNINGS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 COUNTY ROAD 45
 City PIEDMONT State AL Zip Code 36272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PCA INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AB01017A6930B4E0088C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. JENSEN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9351 S HARDING AVE #2
 City EVERGREEN PARK State IL Zip Code 60805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : A9E8A3131B04542B499D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1009 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JENSEN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9351 S HARDING AVE #2
 City EVERGREEN PARK State IL Zip Code 60805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : A63FC2EADD5084F3EAB4
 Amount of Each Receipt this Period 200.00
 Memo Item

B. JENSEN, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 SWEDISH DRIVE NE
 City ANDOVER State MN Zip Code 55304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A27D92369738B493792D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. JEONG, DEOOSOON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10823 COLIMA RD
 City WHITTIER State CA Zip Code 90604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEOOSOON JEONG Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : ADB24CD7004864C5B972
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1010 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JEONG, DEOJSOON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10823 COLIMA RD
 City WHITTIER State CA Zip Code 90604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEOJSOON JEONG Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A14A38FEE74AD4FB8899
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JOACHIM, ETHELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1216 IOLA ROAD
 City OCEAN SPRINGS State MS Zip Code 39564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A26768CD25F1B446C830
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JOACHIM, ETHELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1216 IOLA ROAD
 City OCEAN SPRINGS State MS Zip Code 39564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 02 / 2021
Transaction ID : A1ADC037149414DBF9D7
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1011 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOACHIM, ETHELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1216 IOLA ROAD
 City OCEAN SPRINGS State MS Zip Code 39564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : A112A0300613D452E9C3
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JOACHIM, ETHELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1216 IOLA ROAD
 City OCEAN SPRINGS State MS Zip Code 39564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A95AF019E4A064FCBA90
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JOBE, GORDON, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5015 CARNOUSTIE DR
 City RENO State NV Zip Code 89502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : AAB5C92C16F174AFE89B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1012 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHANEK, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8496 FOUR MILE RD
 City LAWTON State OK Zip Code 73507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2021
Transaction ID : A6050BF5AE5814D3B8BA
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. JOHANEK, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8496 FOUR MILE RD
 City LAWTON State OK Zip Code 73507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AD639D55ECB7F4D479F3
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. JOHANEK, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8496 FOUR MILE RD
 City LAWTON State OK Zip Code 73507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A70419D178D0D4F38A6F
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1013 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHANEK, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8496 FOUR MILE RD
 City LAWTON State OK Zip Code 73507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AEAD229173E3B47658E1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. JOHANEK, JAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8496 FOUR MILE RD
 City LAWTON State OK Zip Code 73507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : ACAD6B3CB19854321870
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. JOHNSEN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5195 N SPLITRAIL DR.
 City COLORADO SPRINGS State CO Zip Code 80917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : AEFDCD49B79BB41AFBAE
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1014 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSEN, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4505 S YOSEMITE ST
107

City DENVER State CO Zip Code 80237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AB656C8E17D9A4D0B839

Amount of Each Receipt this Period 50.00

Memo Item

B. JOHNSEN, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4505 S YOSEMITE ST
107

City DENVER State CO Zip Code 80237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AF872DCDA874E4B97974

Amount of Each Receipt this Period 50.00

Memo Item

C. JOHNSON, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 ALBERT WAY

City NIPOMO State CA Zip Code 93444

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A3741099116ED40CCAF8

Amount of Each Receipt this Period 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1015 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, CHARLIE, , ,

Mailing Address 135 ARTHUR RD.

City ASHEVILLE	State NC	Zip Code 28806
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2021

Transaction ID : AE1A6E3868A29491FA2F

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, CHARLIE, , ,

Mailing Address 135 ARTHUR RD.

City ASHEVILLE	State NC	Zip Code 28806
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2021

Transaction ID : AF2852920F3304B828E0

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, DENNIS, , ,

Mailing Address 3418 E. SUNCREST CT

City PHOENIX	State AZ	Zip Code 85044-3506
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRAFFICADE SERVICE	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2021

Transaction ID : A2A1F72772BA847DC86F

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1016 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E. SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 25 / 2021
Transaction ID : AD78B3E01EE1945B5B01
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E. SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 14 / 2021
Transaction ID : AA5DDE0C5656645BEB69
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E. SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 25 / 2021
Transaction ID : AB4B389F61B9949A0A48
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1017 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, DENNIS, , ,

Mailing Address 3418 E. SUNCREST CT

City PHOENIX State AZ Zip Code 85044-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2021

Transaction ID : A87A2CC9592E2462FBDD

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, DENNIS, , ,

Mailing Address 3418 E. SUNCREST CT

City PHOENIX State AZ Zip Code 85044-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2021

Transaction ID : AAACA338453584127B4C

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JOHNSON, DENNIS, , ,

Mailing Address 3418 E. SUNCREST CT

City PHOENIX State AZ Zip Code 85044-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2021

Transaction ID : AD1ABFEEF0B394FEA80F

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1018 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E. SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : A0849B1C5FE3E482480D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E. SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A0C2EDA6201AA4713BBA
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JOHNSON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3418 E. SUNCREST CT
 City PHOENIX State AZ Zip Code 85044-3506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAFFICADE SERVICE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **06 / 25 / 2021**
Transaction ID : A239D210B4A904179B72
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1019 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, DETHANE, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 186

City SHELDON	State SC	Zip Code 29941
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2021

Transaction ID : A0FAF3CA7AFF146538E5

Amount of Each Receipt this Period
35.00

Memo Item

B. JOHNSON, DETHANE, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 186

City SHELDON	State SC	Zip Code 29941
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2021

Transaction ID : A37B3C54C0DEB4483BA6

Amount of Each Receipt this Period
50.00

Memo Item

C. JOHNSON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 PIERCE?S WAY

City LYMAN	State ME	Zip Code 04002
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021

Transaction ID : A2FC808CD7B444873B26

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1020 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 PIERCE'S WAY
 City LYMAN State ME Zip Code 04002-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AB3D3BA6B2E2B44C28C9
 Amount of Each Receipt this Period 75.00
 Memo Item

B. JOHNSON, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 SOUTHWATCH LANE
 City MECHANICSBURG State PA Zip Code 17050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOHNSON ENTERPRISES INTERNAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2021
Transaction ID : A40AC73A8402A469DBA8
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JOHNSON, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 SOUTHWATCH LANE
 City MECHANICSBURG State PA Zip Code 17050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOHNSON ENTERPRISES INTERNATI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 18 / 2021
Transaction ID : A55AE6B98B7D74037AB5
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1021 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 SOUTHWATCH LANE
 City MECHANICSBURG State PA Zip Code 17050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) JOHNSON ENTERPRISES INTERNAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2021
Transaction ID : ACCB1140BF4E6460EAA7
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JOHNSON, KATHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 COUNTY HIGHWAY O
 City WARRENS State WI Zip Code 54666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 29 / 2021
Transaction ID : A8174B28451364E398C4
 Amount of Each Receipt this Period 500.00
 Memo Item

C. JOHNSON, MARION, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 TOULOUSE DR
 City AUSTIN State TX Zip Code 78748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A16D8232D3DE34C1CA80
 Amount of Each Receipt this Period 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 655.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1022 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, MARION, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 TOULOUSE DR
 City AUSTIN State TX Zip Code 78748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AD2DBF4D24CCA4061B4F
 Amount of Each Receipt this Period 25.00
 Memo Item

B. JOHNSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 685 GOODGOIN RD
 City RUSTON State LA Zip Code 71270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PLUMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A542962B10FEE4ACE865
 Amount of Each Receipt this Period 35.00
 Memo Item

C. JOHNSON, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7843 MARQUETTE
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A3A0B05EC3FCA481DA3F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1023 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7843 MARQUETTE
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : A40E964B266A3405E90E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. JOHNSON, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7843 MARQUETTE
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A2C15290CF2E44C26A13
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. JOHNSON, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 N.E. 55TH CT.
 City FORT LAUDERDALE State FL Zip Code 33308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : A9E233D37860C4BE8BD5
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1024 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2011 N.E. 55TH CT.
 City FORT LAUDERDALE State FL Zip Code 33308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 12 / 2021**
Transaction ID : A8689AC8982DE4B54AAC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JOHNSON, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15316 N MAY
 City EDMOND State OK Zip Code 73013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LASERLIGHT Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : AD35CE93EB1AF493CA2D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JOHNSON, VICTORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15316 N MAY
 City EDMOND State OK Zip Code 73013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LASERLIGHT Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A9C76DE85A474462A901
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1025 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSON, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 43247
 City TUCSON State AZ Zip Code 85733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : AA8C37D9B868D467EA1F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. JOHNSON, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 43247
 City TUCSON State AZ Zip Code 85733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A19504A7817B34FBFB26
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. JOHNSTON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4826 BLACKWOOD CROSS LANE
 City ARLINGTON State TX Zip Code 76005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATT Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AEEB17282AEFA483CB08
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1026 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOHNSTON, MARY ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CAHILL DRIVE
 City CAPE NEDDICK State ME Zip Code 03902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT NORTHERN ELEVATOR Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A987D7F0A3FCA419B986
 Amount of Each Receipt this Period 35.00
 Memo Item

B. JONES, ANITA, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 HOLLOW DRIVE
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A1200DC2C75924AC2BDF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JONES, ANITA, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 455 HOLLOW DRIVE
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A96A4DC14CF4E4322933
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1027 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JONES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 OLD CASTLE POINT RD
 City WAPPINGERS FALLS State NY Zip Code 12590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A4CDAEFC86561480B8D5
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JONES, FRANCINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 226 SUSIEANNA ST
 City KENAI State AK Zip Code 99611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RESTERAUNT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 27 / 2021
Transaction ID : A2C09533E36854FAA9C7
 Amount of Each Receipt this Period 225.00
 Memo Item

C. JONES, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 LAUREL OAK ROAD
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A48FDE337BDA3473FB8D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1028 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JONES, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 LAUREL OAK ROAD
 City FERNANDINA BEACH State FL Zip Code 32034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A721C1A94B93644CE8FE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JONES, JOSEPH, W., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 WHETSTONE ST
 City MONROEVILLE State AL Zip Code 36460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CROWNE HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 19 / 2021
Transaction ID : AC7B3B2C54EB648E7A85
 Amount of Each Receipt this Period 250.00
 Memo Item

C. JONES, KRISTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 434
 City DANIEL State WY Zip Code 83115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2021
Transaction ID : A38780CD10AE04322AC6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1029 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JONES, KRISTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 434

City DANIEL	State WY	Zip Code 83115
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) REAL ESTATE BROKER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 06 / 21 / 2021
Transaction ID : A1AB2218616DC4FD0963

Amount of Each Receipt this Period
50.00

Memo Item

B. JONES, SUNNDAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8409 NE 4TH PLAIN BLVD

City VANCOUVER	State WA	Zip Code 98662
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A NEW IMAGE	Occupation (for Individual) SMALL BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 05 / 02 / 2021
Transaction ID : A89F27373816449DEBBC

Amount of Each Receipt this Period
50.00

Memo Item

C. JONES, SUNNDAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8409 NE 4TH PLAIN BLVD

City VANCOUVER	State WA	Zip Code 98662
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A NEW IMAGE	Occupation (for Individual) SMALL BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 06 / 02 / 2021
Transaction ID : A235AACE7543E45E0AC2

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1030 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JORDAN, ANNA, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1480 MAIN ST

City CARBONDALE	State CO	Zip Code 81623
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2021

Transaction ID : AF98AD86A03714DC485C

Amount of Each Receipt this Period
50.00

Memo Item

B. JORDAN, COMA, F, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3205 MEADOWCREST DR

City ANDERSON	State IN	Zip Code 46011
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2021

Transaction ID : AB3D3C2D6CF3544A68D5

Amount of Each Receipt this Period
100.00

Memo Item

C. JORDAN, COMA, F, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3205 MEADOWCREST DR

City ANDERSON	State IN	Zip Code 46011
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2021

Transaction ID : A15BAE21C79E74FF3B61

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1031 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JORDAN, COMA, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3205 MEADOWCREST DR
 City ANDERSON State IN Zip Code 46011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2021
Transaction ID : A0F32E93AC23445649C1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. JORDAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4327 EAST GLENNAIRE DR
 City SPOKANE State WA Zip Code 99223-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A9D889AB2C1C94BB4933
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. JORDAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4327 EAST GLENNAIRE DR
 City SPOKANE State WA Zip Code 99223-1522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A3F4E62995EAF4451B78
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1032 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JORGENSEN, N VALDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 N MC CULLEN ST
 City BURGAW State NC Zip Code 28425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIELS JORGENSEN COMP INC Occupation (for Individual) MANUFACTURING VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021
Transaction ID : AACE1D36567A9439E9BD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JORGENSEN, N VALDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 N MC CULLEN ST
 City BURGAW State NC Zip Code 28425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIELS JORGENSEN COMP INC Occupation (for Individual) MANUFACTURING VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AC5A25AD4828748B6986
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JOSEPH, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2035 WESTWOOD BLVD 207
 City LOS ANGELES State CA Zip Code 90025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 07 / 2021
Transaction ID : AA03D705BD1BE42D89E0
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1033 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JOYCE, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 142 GOODWIVES RIVER RD
 City DARIEN State CT Zip Code 06820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : A9EA54F372383468B91E
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. JULIANO, BEVERLY, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8269 MORLEY RD
 City MENTOR State OH Zip Code 44060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A8E712D7473544871BC9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KABAKER, MARY ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 224
 City COLUMBUS State ND Zip Code 58727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A5F15400E999244198C2
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	335.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1034 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KACENSKY, PETER, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2075 BACK NINE TRAIL
 City RENO State NV Zip Code 89523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2021
Transaction ID : AB781035CC46246EBBA7
 Amount of Each Receipt this Period 150.00
 Memo Item

B. KAFTAN, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29100 NORTHWESTERN HWY 260
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAFTAN ENTERPRISES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 02 / 2021
Transaction ID : A74B036611CC443EFB7E
 Amount of Each Receipt this Period 250.00
 Memo Item

C. KAFTAN, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29100 NORTHWESTERN HWY 260
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAFTAN ENTERPRISES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 02 / 2021
Transaction ID : A25228DD3B2724E3ABAB
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1035 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAFTAN, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29100 NORTHWESTERN HWY
 260
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAFTAN ENTERPRISES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : A367D88BA48754D50B30
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. KAFTAN, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29100 NORTHWESTERN HWY
 260
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAFTAN ENTERPRISES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : A58EC3FE747944BBE9DE
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. KAFTAN, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29100 NORTHWESTERN HWY
 260
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAFTAN ENTERPRISES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A6DFBA65993534C1FB9B
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1036 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAFTAN, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29100 NORTHWESTERN HWY
 260
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAFTAN ENTERPRISES Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A6A0FF0FBA5FD4E67824
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. KAGEL, MARION, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CLEARVIEW AVENUE
 City WILMINGTON State DE Zip Code 19809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021
Transaction ID : A9780F51439BC4536A68
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KAGEL, MARION, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 CLEARVIEW AVENUE
 City WILMINGTON State DE Zip Code 19809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A58A901FE657C43208F0
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1037 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : AAD4FB7EDDD2F458E9C6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : AE81D31388A5E4D829E4
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 02 / 2021
Transaction ID : AFF2E2E3CC7E343EE9C8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1038 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 14 / 2021
Transaction ID : A8CDA7DBFD42E4C8685E
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A519BC78F522547C8BC2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 14 / 2021
Transaction ID : AA5E1E5FB23D7423793B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1039 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A0259E1D885CB4FFEB03
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : AECBFC7C258D54C3986D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : AD13A97FCE7834ED4864
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1040 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AE1AE76247C044D87BC4
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KAISER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2321 CANDLESTICK DRIVE
 City ANTIOCH State CA Zip Code 94509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A5EDD9C67F59E4AEDA16
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAMEEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 MAIN ST
 City FOREST CITY State PA Zip Code 18421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AC3ACF5EEE8FD483C9AA
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1041 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAPLAN, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4852 EXETER ESTATE LANE
 City LAKE WORTH State FL Zip Code 33449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 216.00

Date of Receipt
 06 / 13 / 2021
Transaction ID : A005758F1DDC6434286F
 Amount of Each Receipt this Period
 36.00
 Memo Item

B. KAPLAN, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 COUNTY RTE 19
 City RICHVILLE State NY Zip Code 13681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 29 / 2021
Transaction ID : ACB517F3F9D224763826
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KAPLAN, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 COUNTY RTE 19
 City RICHVILLE State NY Zip Code 13681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 29 / 2021
Transaction ID : A6A79E9806C17428C9E5
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	236.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1042 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAPLAN, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 COUNTY RTE 19
 City RICHVILLE State NY Zip Code 13681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A1FED0158B4B14728915
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KAPLAN, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 COUNTY RTE 19
 City RICHVILLE State NY Zip Code 13681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A3A6D148D4CD342F3AB0
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KAPLAN, MILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 PATRIOT BLVD 336
 City GLENVIEW State IL Zip Code 60026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A4FC9793D270D453DAD2
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1043 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KARAFFA, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RUE RENOIR
 City PALM COAST State FL Zip Code 32137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVENT HEALTH MEDICAL GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A0286EA48219B4113893
 Amount of Each Receipt this Period 75.00
 Memo Item

B. KARAFFA, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RUE RENOIR
 City PALM COAST State FL Zip Code 32137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVENT HEALTH MEDICAL GROUP Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A338BDF611C7D41D88C7
 Amount of Each Receipt this Period 75.00
 Memo Item

C. KATHARANI, HARISH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 ALKIRE LAKE DRIVE
 City SUGAR LAND State TX Zip Code 77478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HDK INVESTMENT LLC Occupation (for Individual) PHARMACIST/INVESTOR REAL-ESTA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2021
Transaction ID : A5A020D9B8B954DB0BC0
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1044 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KATHARANI, HARISH, , ,

Mailing Address 918 ALKIRE LAKE DRIVE

City SUGAR LAND	State TX	Zip Code 77478
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HDK INVESTMENT LLC	Occupation (for Individual) PHARMACIST/INVESTOR REAL-EST/
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2021

Transaction ID : A52DE3F5564AC417199E

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KATHARANI, HARISH, , ,

Mailing Address 918 ALKIRE LAKE DRIVE

City SUGAR LAND	State TX	Zip Code 77478
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HDK INVESTMENT LLC	Occupation (for Individual) PHARMACIST/INVESTOR REAL-EST/
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021

Transaction ID : ADD025AE9775049E8B85

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KATHARANI, HARISH, , ,

Mailing Address 918 ALKIRE LAKE DRIVE

City SUGAR LAND	State TX	Zip Code 77478
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HDK INVESTMENT LLC	Occupation (for Individual) PHARMACIST/INVESTOR REAL-ESTA
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021

Transaction ID : A830E2A89BFC847FFABB

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1045 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KATHARANI, HARISH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 ALKIRE LAKE DRIVE
 City SUGAR LAND State TX Zip Code 77478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HDK INVESTMENT LLC Occupation (for Individual) PHARMACIST/INVESTOR REAL-EST/
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A6A7DD10CA481407D848
 Amount of Each Receipt this Period 250.00
 Memo Item

B. KATHARANI, HARISH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 918 ALKIRE LAKE DRIVE
 City SUGAR LAND State TX Zip Code 77478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HDK INVESTMENT LLC Occupation (for Individual) PHARMACIST/INVESTOR REAL-EST/
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 24 / 2021
Transaction ID : ABED2BE2B2031411C97A
 Amount of Each Receipt this Period 250.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 26 / 2021
Transaction ID : AEED46D9A0114199931
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1046 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **01 / 29 / 2021**
Transaction ID : A5A9404122CC2486A81E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **01 / 30 / 2021**
Transaction ID : A595A1E5701734E31AA2
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 14 / 2021**
Transaction ID : AE8852665057B40F9976
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1047 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2021
Transaction ID : AC62385C91D494ADABC9
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2021
Transaction ID : AD97A20B914DA4B2191D
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2021
Transaction ID : A6D75982D38D2406792E
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1048 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A2620C15F9BDC4AD4B94
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A32F9F295685646E68D9
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 03 / 14 / 2021
Transaction ID : AE6ECFE4684AC44CE82A
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1049 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt **03 / 17 / 2021**
Transaction ID : A87818E7B15F7427FA8F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt **03 / 25 / 2021**
Transaction ID : AFD9EB5D4AA4444268C0
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt **03 / 26 / 2021**
Transaction ID : A193ED43E25214059B83
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1050 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2021

Transaction ID : A803E0FF29E2E4ABDBAF

Amount of Each Receipt this Period
50.00

Memo Item

B. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2021

Transaction ID : A9522A6A71D704A07A33

Amount of Each Receipt this Period
100.00

Memo Item

C. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2021

Transaction ID : AB0E869F8D0E54802884

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1051 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : ACDB6BEBD997F460F8E3
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2021
Transaction ID : ACF0A1976A6914F19B18
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A00956705283242CF958
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1052 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2021

Transaction ID : A46D737E48B8449E3B18

Amount of Each Receipt this Period
50.00

Memo Item

B. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2021

Transaction ID : A08FE60B003E549138A0

Amount of Each Receipt this Period
100.00

Memo Item

C. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A2EE30506FEAD4CF5A1A

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1053 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1575.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A73E26FBA44C74D02AA3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1675.00

Date of Receipt 05 / 25 / 2021
Transaction ID : AA0330448C85E4F3C912
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1725.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A31A1D69ED8054BB8A50
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1054 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : A084B1035F8CD4AE5A05

Amount of Each Receipt this Period
50.00

Memo Item

B. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : AC7030C81D2C34FB791D

Amount of Each Receipt this Period
100.00

Memo Item

C. KAVONIAN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BILLY CASPER DR

City EL PASO	State TX	Zip Code 79936-4627
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GARY KAVONIAN	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A1B8C0C006A0943B1858

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1055 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A8238E705B9B242E9838
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A1FCA6F9B165E4D809B1
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AAED912FC8165430898D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1056 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2150.00

Date of Receipt **06 / 29 / 2021**
Transaction ID : ADC5BE9FFE31E438EBC2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KAVONIAN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 BILLY CASPER DR
 City EL PASO State TX Zip Code 79936-4627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GARY KAVONIAN Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A263C9CB3E5DF4ABBAF6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KAYROUZ, TANNOUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 NORTH STREET
 City UPTON State MA Zip Code 01568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) KAYROUZ PETROLEUM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 03 / 2021**
Transaction ID : AEC53AE147F36432DA5A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1057 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAYROUZ, TANNOUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 NORTH STREET
 City UPTON State MA Zip Code 01568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) KAYROUZ PETROLEUM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A8F543E2C4A5746319BE
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. KAZANJIAN, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2223 MIDLOTHIAN DR
 City ALTADENA State CA Zip Code 91001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : ADE1032EBB91F497791A
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. KEADY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 EAMES WAY
 City MARSHFIELD State MA Zip Code 02050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DTCC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : A4F756FB04D87452A95C
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1058 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEADY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 EAMES WAY

City MARSHFIELD	State MA	Zip Code 02050
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DTCC	Occupation (for Individual) MANAGING DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 24 / 2021
Transaction ID : A8F3C67D14FFC4D35973

Amount of Each Receipt this Period
 100.00

Memo Item

B. KEADY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 EAMES WAY

City MARSHFIELD	State MA	Zip Code 02050
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DTCC	Occupation (for Individual) MANAGING DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 24 / 2021
Transaction ID : A056AFE9E2BF148E7835

Amount of Each Receipt this Period
 100.00

Memo Item

C. KEADY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 765 EAMES WAY

City MARSHFIELD	State MA	Zip Code 02050
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DTCC	Occupation (for Individual) MANAGING DIRECTOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 06 / 24 / 2021
Transaction ID : AF6BEE21B9C7F4BC6B45

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1059 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEELING, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3470 WILD OAK BAY
 147
 City BRADENTON State FL Zip Code 34210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A224AA49340D740EFB02
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KEELING, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3470 WILD OAK BAY
 147
 City BRADENTON State FL Zip Code 34210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : AD8B68F8E969A4D27988
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KEEL, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11009 HWY 92
 City DALEVILLE State AL Zip Code 36322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : A1E9A1D8277944B70B5B
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1060 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEENAN, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14043 NW COUNTY RD 12
 City BRISTOL State FL Zip Code 32321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A521EF5EDC4B848A6920
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KEENAN, GLORIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14043 NW COUNTY RD 12
 City BRISTOL State FL Zip Code 32321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A087B03BEED86474AA95
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2021
Transaction ID : A7C77E229711D4473834
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1061 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 13 / 2021
Transaction ID : A4A600CD17467461EA38
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 02 / 05 / 2021
Transaction ID : A7E63BBCA9A6D4D18B14
 Amount of Each Receipt this Period 250.00
 Memo Item

C. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 13 / 2021
Transaction ID : AD11D1F9225AB439897E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1062 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : A2E2B44AB6D564380A43
 Amount of Each Receipt this Period 250.00
 Memo Item

B. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A4F6A213D89DB43FAB7E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021
Transaction ID : AFFFAF2A9AFD742C3A43
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1063 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEEN, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 885

City SILVER CITY	State NM	Zip Code 88062
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WNM COMMUNICATIONS	Occupation (for Individual) TELEPHONE COMPANY CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2021

Transaction ID : A1F4A97BDFCA143E4A36

Amount of Each Receipt this Period
50.00

Memo Item

B. KEEN, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 885

City SILVER CITY	State NM	Zip Code 88062
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WNM COMMUNICATIONS	Occupation (for Individual) TELEPHONE COMPANY CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2021

Transaction ID : A1147A0B21A8D47CEA4E

Amount of Each Receipt this Period
250.00

Memo Item

C. KEEN, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 885

City SILVER CITY	State NM	Zip Code 88062
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WNM COMMUNICATIONS	Occupation (for Individual) TELEPHONE COMPANY CEO
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2021

Transaction ID : A3FAD12453B3C487190D

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1064 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEEN, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 885
 City SILVER CITY State NM Zip Code 88062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNM COMMUNICATIONS Occupation (for Individual) TELEPHONE COMPANY CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AF10BE6F4E54542269BA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KEETON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3602 FM 2554
 City IVANHOE State TX Zip Code 75447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARM & RANCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : AE1D78E60F2344FBE8FD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KEETON, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3602 FM 2554
 City IVANHOE State TX Zip Code 75447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARM & RANCH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A435162A93D88452DA2D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1065 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2021

Transaction ID : A6E22287616644581985

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2021

Transaction ID : A3EFC830AE8E445AAA2

Amount of Each Receipt this Period
40.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2021

Transaction ID : A59A8310735834712867

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1066 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2021

Transaction ID : A29A62D0D9D744D4E8E0

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2021

Transaction ID : A366267F944EF42F49FF

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2021

Transaction ID : A9589FFD2EA494C53AC0

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1067 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021

Transaction ID : A9D24DCF1832540F485A

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021

Transaction ID : A87DAB2A46F054917B3E

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KEHM, JOHN, , ,

Mailing Address 31080 SW 5TH ST

City LEBANON	State OR	Zip Code 97355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021

Transaction ID : A91F4B6DB9FEB43E4B80

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1068 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEHM, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31080 SW 5TH ST
 City LEBANON State OR Zip Code 97355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A527361ADE228459C9E5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KEHM, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31080 SW 5TH ST
 City LEBANON State OR Zip Code 97355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AD4E61C5268064AF681C
 Amount of Each Receipt this Period 15.00
 Memo Item

C. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT.
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A929684C6AE8245FEBC3
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1069 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT.
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A767D4C5523F8413EB11
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KELLER, JEROME, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON RD
 City WAYNE State PA Zip Code 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A148517AEAF784D5CBE0
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KELLER, JEROME, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 THOMAS JEFFERSON RD
 City WAYNE State PA Zip Code 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 15 / 2021
Transaction ID : AAC8C9F00635A4F0681E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1070 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KELLER, JEROME, C., ,

Mailing Address 626 THOMAS JEFFERSON RD

City WAYNE	State PA	Zip Code 19087
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : A2E4E2E79309E4A2F936

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KELLER, JEROME, C., ,

Mailing Address 626 THOMAS JEFFERSON RD

City WAYNE	State PA	Zip Code 19087
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : A7DD50E50D44F4F1F864

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KELLER, WILLIAM, H, COL.,

Mailing Address 459 CHADWICK SHORES DRIVE

City SNEADS FERRY	State NC	Zip Code 28460
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2021

Transaction ID : AEB4258264FC14569958

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1071 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KELLEY, GLEN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27204 ROBINSON RD.

City HEMPSTEAD	State TX	Zip Code 77445
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : AED98988C305543ACB4D

Amount of Each Receipt this Period
25.00

Memo Item

B. KELLEY, GLEN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27204 ROBINSON RD.

City HEMPSTEAD	State TX	Zip Code 77445
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2021

Transaction ID : AC651D2DA1BB64341AB1

Amount of Each Receipt this Period
35.00

Memo Item

C. KELLEY, GLEN, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27204 ROBINSON RD.

City HEMPSTEAD	State TX	Zip Code 77445
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2021

Transaction ID : AF6F08C4DD64346229EA

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1072 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KELLEY, GLEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27204 ROBINSON RD.
 City HEMPSTEAD State TX Zip Code 77445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : ACBED61CBEE3A4C4DBD
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KELLEY, GLEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27204 ROBINSON RD.
 City HEMPSTEAD State TX Zip Code 77445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **05 / 09 / 2021**
Transaction ID : A000BAF9C78ED4626B19
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KELLEY, GLEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27204 ROBINSON RD.
 City HEMPSTEAD State TX Zip Code 77445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : A5C24F676B6A04256BEE
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1073 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KELLEY, GLEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27204 ROBINSON RD.
 City HEMPSTEAD State TX Zip Code 77445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A4307175667E64688A59
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. KELLEY, GLEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27204 ROBINSON RD.
 City HEMPSTEAD State TX Zip Code 77445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : AFA88661EA76C40FCBC5
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. KELLEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 790 COUNTRY CHARM
 City OVIEDO State FL Zip Code 32765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FUGLEBERG KOCH Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : ADCCFF5F27B164559BBA
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1074 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KELLEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 790 COUNTRY CHARM
 City OVIEDO State FL Zip Code 32765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FUGLEBERG KOCH Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A7BFDD8FFDB5240E2A99
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KELLEY, MELBA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6161 ROSE GARDEN LN
 City ROSEVILLE State CA Zip Code 95747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A2CA45994519446E1BA4
 Amount of Each Receipt this Period 25.00
 Memo Item

C. KELLY, MARGUERITE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 LAMPLIGHTER LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : ABC02462AA13D461BB5E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1075 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KELLY, MARGUERITE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 LAMPLIGHTER LANE
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A453818D10E164C93AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KENNEDY, BARBARA, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WAVERLY PLACE
 City CLIFTON PARK State NY Zip Code 12065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : AB9FB9E9324584C3DA96
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KENNEDY, BARBARA, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WAVERLY PLACE
 City CLIFTON PARK State NY Zip Code 12065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : A45A520E807EA45F8AE0
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1076 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 01 / 22 / 2021
Transaction ID : A283B8819999146519F5
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 02 / 05 / 2021
Transaction ID : A1F9B87BD59B747E282B
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 02 / 16 / 2021
Transaction ID : AC77F6A1C075D468EB74
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1077 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEDY, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 PINE RIDGE DR

City HIGH POINT	State NC	Zip Code 27262
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2021

Transaction ID : A2CE629BDD781482EA15

Amount of Each Receipt this Period
100.00

Memo Item

B. KENNEDY, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 PINE RIDGE DR

City HIGH POINT	State NC	Zip Code 27262
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2021

Transaction ID : A5453A6CB872540499EC

Amount of Each Receipt this Period
100.00

Memo Item

C. KENNEDY, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 PINE RIDGE DR

City HIGH POINT	State NC	Zip Code 27262
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2021

Transaction ID : A6B50F1DC66064C588B3

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1078 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : AE39A642E87C14491A8B
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : AA806A7ADE6714EE59DE
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 835.00

Date of Receipt **04 / 16 / 2021**
Transaction ID : A572D7D47A1AD4225891
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1079 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 935.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A6D994123DF154782AEE
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A5920268223D444FFA88
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1060.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A2DAA8E34E47E4A6FB8B
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1080 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1160.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A918085BF0C1D454BA54
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A4D9EE7FE71744E8DB67
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KENNEDY, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 PINE RIDGE DR
 City HIGH POINT State NC Zip Code 27262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A0BF1F0A244C94A2DBE9
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1081 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEDY, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 PINE RIDGE DR

City HIGH POINT	State NC	Zip Code 27262
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2021

Transaction ID : ACA80F9F14B1C468C9F6

Amount of Each Receipt this Period
100.00

Memo Item

B. KENNEDY, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 E DIMOND BLVD
PMB 367

City ANCHORAGE	State AK	Zip Code 99515-1909
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALASKA NEUROLOGY CENTER	Occupation (for Individual) TEACHER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2021

Transaction ID : A14DB013F404A47EBBF7

Amount of Each Receipt this Period
35.00

Memo Item

C. KENNEY, BARBARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16245 SE 31ST STREET

City BELLEVUE	State WA	Zip Code 98008
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2021

Transaction ID : A4271DE9C7D6243C0A01

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1082 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16245 SE 31ST STREET
 City BELLEVUE State WA Zip Code 98008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : AE3F813D7483B4C8798A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KENOSKY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 BEECH ROAD
 City SPRING BROOK TOWNSHIP State PA Zip Code 18444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A939A967A975349EFA71
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. KENTNER, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51525 MARBELLA CT
 City LA QUINTA State CA Zip Code 92253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : AF6B887F2131A41E9B23
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1083 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KENTNER, GEORGE, , ,

Mailing Address 51525 MARBELLA CT

City LA QUINTA	State CA	Zip Code 92253
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2021

Transaction ID : A741F5667CF6143F39C2

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KENTNER, GEORGE, , ,

Mailing Address 51525 MARBELLA CT

City LA QUINTA	State CA	Zip Code 92253
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021

Transaction ID : AAC91227409B34795855

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KENTNER, GEORGE, , ,

Mailing Address 51525 MARBELLA CT

City LA QUINTA	State CA	Zip Code 92253
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021

Transaction ID : AB64CB764654A4B40B19

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1084 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEOGH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 CALIFORNIA OAK DR
 City VISTA State CA Zip Code 92081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 03 / 2021**
Transaction ID : A301C57364C444C1A84E
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KEOGH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 CALIFORNIA OAK DR
 City VISTA State CA Zip Code 92081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : A7F504E21151C4A988AF
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KEOGH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 CALIFORNIA OAK DR
 City VISTA State CA Zip Code 92081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A79CDF09DBCA94CB6A2E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1085 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEOGH, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 649 CALIFORNIA OAK DR
 City VISTA State CA Zip Code 92081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AD2B3F8CAA85748D99AF
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KERCE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 SPORTSMAN CLUB ROAD NE
 City MILLEDGEVILLE State GA Zip Code 31061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERENITY PHYSICAL THERAPY & WELLNESS Occupation (for Individual) MASSAGE THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : AA7FD8A5ABE8649C58EB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KERCE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 SPORTSMAN CLUB ROAD NE
 City MILLEDGEVILLE State GA Zip Code 31061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SERENITY PHYSICAL THERAPY & WELLNESS Occupation (for Individual) MASSAGE THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A0E8E7C14612447AA8E8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1086 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KERN, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4511 HAPPY HOLLOW ROAD
 City ASHEBORO State NC Zip Code 27205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A1FE8937AF3B947F7B14
 Amount of Each Receipt this Period 35.00
 Memo Item

B. KEROUAC, SHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 E 1ST STREET B 106
 City CLE ELUM State WA Zip Code 98922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A7F774E43A51748308C8
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KESSLER, DONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2913 IDAHO ST
 City BAKERSFIELD State CA Zip Code 93305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 15 / 2021
Transaction ID : A8025E1EAF3B64007853
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1087 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KETCHAM, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1307 CALLE CABALLERO

City SAN DIMAS	State CA	Zip Code 91773
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2021

Transaction ID : ABEFA7B7EF2364E43A86

Amount of Each Receipt this Period
200.00

Memo Item

B. KEULEN, FAYETTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7892 CORTE DE LUZ

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2021

Transaction ID : AC5F7F05D0B8141B9B15

Amount of Each Receipt this Period
250.00

Memo Item

C. KEULEN, FAYETTE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7892 CORTE DE LUZ

City SAN DIEGO	State CA	Zip Code 92127
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

Transaction ID : ABAB5537C99C54E8BAEF

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1088 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEULEN, FAYETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7892 CORTE DE LUZ
 City SAN DIEGO State CA Zip Code 92127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : AF890775B7A1D4C0AA6D
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. KEULEN, FAYETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7892 CORTE DE LUZ
 City SAN DIEGO State CA Zip Code 92127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : AFAA35843CE974E51B91
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. KEULEN, FAYETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7892 CORTE DE LUZ
 City SAN DIEGO State CA Zip Code 92127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : AC2E560587B4E41F19A8
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1089 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEULEN, FAYETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7892 CORTE DE LUZ
 City SAN DIEGO State CA Zip Code 92127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A7C97B00E76954E76A16
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. KEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8747 APPLE LN
 City YREKA State CA Zip Code 96097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : AF49A0214744A48348FD
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KEY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8747 APPLE LN
 City YREKA State CA Zip Code 96097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : A6EF095D986EA4DBC42
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1090 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KHAMBANONDA, PAERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 KNEELAND AVE
 City YONKERS State NY Zip Code 10705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A3DBC6DBFCB7D4150B5f
 Amount of Each Receipt this Period 35.00
 Memo Item

B. KILLEAVY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 CROSS STREET
 City BRISTOL State RI Zip Code 02809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYTHEON TECHNOLOGIES Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A7C13A27EBE654E4F84E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KIMBERLING, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 0453
 City HERMITAGE State MO Zip Code 65668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A8F39776D6E7D4968AEE
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1091 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KINCAID, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6824 CORDOVA DRIVE
 City INDIANAPOLIS State IN Zip Code 46221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AF6D6B724E1994654B27
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KINCAID, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6824 CORDOVA DRIVE
 City INDIANAPOLIS State IN Zip Code 46221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A5A31C1965C294170907
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KING, KATHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5008
 City GEORGE State WA Zip Code 98824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : A72E58C53A8864689AEF
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1092 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KING, KATHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5008

City GEORGE	State WA	Zip Code 98824
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2021

Transaction ID : AA56F823680F94C60898

Amount of Each Receipt this Period
75.00

Memo Item

B. KING, KATHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5008

City GEORGE	State WA	Zip Code 98824
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021

Transaction ID : A1647FD43086F4DB8A58

Amount of Each Receipt this Period
75.00

Memo Item

C. KING, KATHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 5008

City GEORGE	State WA	Zip Code 98824
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021

Transaction ID : A632B8B08B6424FA6A75

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1093 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KINNU, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18684 SANTA MARIANA ST
 City FOUNTAIN VALLEY State CA Zip Code 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A6AF4B7F07578481798C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. KINTNER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 176 COTTAGE GROVE AVE. SE APT. 370
 City CEDAR RAPIDS State IA Zip Code 52403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 12 / 2021
Transaction ID : A84B86C34FD584D91BCE
 Amount of Each Receipt this Period 400.00
 Memo Item

C. KIPNESS, CHEMDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 COLBY LANE
 City CRANFORD State NJ Zip Code 07016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AE8F8E291B7134A09858
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	470.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1094 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KIRSCH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3250 STEIN STREET

City MOBILE	State AL	Zip Code 36608
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TECHANAX	Occupation (for Individual) PROGRAM MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021

Transaction ID : ABF57E994012E455A80D

Amount of Each Receipt this Period
35.00

Memo Item

B. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 995 PARKVIEW DRIVE

City TALLAHASSEE	State FL	Zip Code 32311
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021

Transaction ID : A400832FE62534B9D977

Amount of Each Receipt this Period
50.00

Memo Item

C. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 995 PARKVIEW DRIVE

City TALLAHASSEE	State FL	Zip Code 32311
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021

Transaction ID : A57ED9146003049879B2

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1095 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KIRSTEN, REINER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 995 PARKVIEW DRIVE
 City TALLAHASSEE State FL Zip Code 32311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AB5575B01FD514EFEB92
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KIRWAN, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A7DC5333D7DAD488495B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KIRWAN, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A82E4BDA613A34F2983A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1096 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KIRWAN, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : AC6BEB1486F3B4BB7A24
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KIRWAN, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 GROVE STREET
 City SONOMA State CA Zip Code 95476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AF16D625170F54E0CB83
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KIRWAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 HIAWATHA WAY
 City MELBOURNE BEACH State FL Zip Code 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : AEF68408C942A4B42AC9
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1097 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KIRWAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 HIAWATHA WAY
 City MELBOURNE BEACH State FL Zip Code 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A2804B895B8514C0C9D5
 Amount of Each Receipt this Period 35.00
 Memo Item

B. KIRWAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 HIAWATHA WAY
 City MELBOURNE BEACH State FL Zip Code 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A573027F5FB04496DB5C
 Amount of Each Receipt this Period 25.00
 Memo Item

C. KIRWAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 HIAWATHA WAY
 City MELBOURNE BEACH State FL Zip Code 32951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : AE0213F99DECE435E80F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1098 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KISSNER, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 EXECUTIVE LANE
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 03 / 2021**
Transaction ID : AE5A7BA41DA8740EBBB/
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KISSNER, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 EXECUTIVE LANE
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : AAAE13A40AB61454DB26
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KISSNER, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 EXECUTIVE LANE
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A32370ECAD77446ACA78
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1099 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KISSNER, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 EXECUTIVE LANE
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A21C743F240FA4C4E8B9
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KLANCNIK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 527 S. BRIGHTON LANE
 City PALATINE State IL Zip Code 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : AC266E00E137A456480D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KLEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 WARDS CHAPEL ROAD
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC. Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 13 / 2021
Transaction ID : AFFA3F03A7B304E018D0
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1100 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KLEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 WARDS CHAPEL ROAD
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC. Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 13 / 2021**
Transaction ID : A2A7232BD234F4D8891D
 Amount of Each Receipt this Period 250.00
 Memo Item

B. KLEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 WARDS CHAPEL ROAD
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC. Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 13 / 2021**
Transaction ID : ADA68B49477704A79BDA
 Amount of Each Receipt this Period 250.00
 Memo Item

C. KLEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 WARDS CHAPEL ROAD
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC. Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 13 / 2021**
Transaction ID : A247294509BF04E74A1E
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1101 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KLEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 WARDS CHAPEL ROAD
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC. Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A1BD26BA7B05C44199AA
 Amount of Each Receipt this Period 250.00
 Memo Item

B. KLEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 WARDS CHAPEL ROAD
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC. Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 13 / 2021
Transaction ID : ABE47A6E8B3F74429B9F
 Amount of Each Receipt this Period 250.00
 Memo Item

C. KLEIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4707 WARDS CHAPEL ROAD
 City OWINGS MILLS State MD Zip Code 21117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC. Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AE490EE85245943398B1
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1102 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KLEIN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4707 WARDS CHAPEL ROAD

City OWINGS MILLS	State MD	Zip Code 21117
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC.	Occupation (for Individual) MECHANICAL ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2021

Transaction ID : A46F80A0B1EA1437AB91

Amount of Each Receipt this Period
250.00

Memo Item

B. KLEIN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4707 WARDS CHAPEL ROAD

City OWINGS MILLS	State MD	Zip Code 21117
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC.	Occupation (for Individual) MECHANICAL ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : A6566AC2FF2C34641858

Amount of Each Receipt this Period
250.00

Memo Item

C. KLEIN, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 467 WILSHIRE WAY

City HARLEYSVILLE	State PA	Zip Code 19438
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2021

Transaction ID : AE95E8980198F4115B15

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1103 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KLENCK, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 VILLA VIEW DR
 City STAUNTON State VA Zip Code 24401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAMPUS CRUSADE Occupation (for Individual) MENTOR/DESCIPLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A51E251B57EF94E8C9A0
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. KLINE, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 KOHLER HILL RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A972ECC74FBE64A9B81B
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KLINE, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 KOHLER HILL RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A4AFC4C4FB3514210B35
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1104 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KLINE, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4042 CAISSONS COURT
 City ENOLA State PA Zip Code 17025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A75CEEE14158B419DA1B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KLINE, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4042 CAISSONS COURT
 City ENOLA State PA Zip Code 17025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A99E44E3AFF9541E597E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KNIFFING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14940 OAK CREEK RD
 City EL CAJON State CA Zip Code 92021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) KNIFFINGS NURSERY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 03 / 2021
Transaction ID : A19F9B80E68224133842
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1105 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KNIFFING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14940 OAK CREEK RD
 City EL CAJON State CA Zip Code 92021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) KNIFFINGS NURSERY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2021
Transaction ID : AB369BC0F1D8D4B30BBC
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KNIFFING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14940 OAK CREEK RD
 City EL CAJON State CA Zip Code 92021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) KNIFFINGS NURSERY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AC7E46EAA4948449DB80
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KNIFFING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14940 OAK CREEK RD
 City EL CAJON State CA Zip Code 92021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) KNIFFINGS NURSERY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : AC18B83FDCF4F470C83A
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1106 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KNIFFING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14940 OAK CREEK RD

City EL CAJON	State CA	Zip Code 92021
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) KNIFFINGS NURSERY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021

Transaction ID : A038B410C4E45499394E

Amount of Each Receipt this Period
 100.00

Memo Item

B. KNIFFING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14940 OAK CREEK RD

City EL CAJON	State CA	Zip Code 92021
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) KNIFFINGS NURSERY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021

Transaction ID : AB86976470AB14B30B6A

Amount of Each Receipt this Period
 100.00

Memo Item

C. KNIFFING, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14940 OAK CREEK RD

City EL CAJON	State CA	Zip Code 92021
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) KNIFFINGS NURSERY
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021

Transaction ID : A28BA3B66ABF04318BFE

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 1107 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KNIGHT, ERNEST, , ,

Mailing Address 94-608 KUPUOHI ST.
10C

City WAIPAHU	State HI	Zip Code 96797
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2021

Transaction ID : A1D90DD859A484A638C7

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KNIGHT, ERNEST, , ,

Mailing Address 94-608 KUPUOHI ST.
10C

City WAIPAHU	State HI	Zip Code 96797
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : AD920BFAED34F4CD19D4

Amount of Each Receipt this Period
12.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KNIPPER, PETER, , ,

Mailing Address 4743 QUIVIRA DRIVE

City SHAWNEE	State KS	Zip Code 66216
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSTRUCTION
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2021

Transaction ID : A7F7BFEA4A7C2431F973

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	97.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1108 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KNIPPER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4743 QUIVIRA DRIVE
 City SHAWNEE State KS Zip Code 66216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A699522679CC24DBBB48
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KNOFF, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 OCEAN DR.
 City CAPE MAY State NJ Zip Code 08204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANYON CLUB MARINA Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : AECAD44ADA36143E3809
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KNORR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 VIEWCREST CT
 City AUBURN State CA Zip Code 95603-6090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A99CC45F5DA3E4D0DAD4
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1109 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KNOX, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 VIA WAZIER
 City NEWPORT BEACH State CA Zip Code 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNOX GENERAL INSURANCE BROKERS Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A567EE491E139425F89D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KNOX, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 VIA WAZIER
 City NEWPORT BEACH State CA Zip Code 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KNOX GENERAL INSURANCE BROKERS Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : ADBB92538CE9249EFACC
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KNUTSON, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 312 WEST HASTING
 City SPOKANE State WA Zip Code 99218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OWN SEVERAL RETIREMENT HOMES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2021
Transaction ID : AB2ABAC855C174117814
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1110 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KNOTSON, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 312 WEST HASTING
 City SPOKANE State WA Zip Code 99218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OWN SEVERAL RETIREMENT HOME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **02 / 02 / 2021**
Transaction ID : A896FFD7486964692BA7
 Amount of Each Receipt this Period **500.00**
 Memo Item

B. KODAK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 HOLLY HILL DRIVE
 City AUSTIN State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 28 / 2021**
Transaction ID : A0CF24DD25C1F436F9EA
 Amount of Each Receipt this Period **125.00**
 Memo Item

C. KODAK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 HOLLY HILL DRIVE
 City AUSTIN State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **375.00**

Date of Receipt **03 / 30 / 2021**
Transaction ID : A3DEF39D2020B4E2FB1F
 Amount of Each Receipt this Period **125.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1111 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KODAK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 HOLLY HILL DRIVE
 City AUSTIN State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : AD68FCFE4B006423DBF0
 Amount of Each Receipt this Period 125.00
 Memo Item

B. KODAK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 HOLLY HILL DRIVE
 City AUSTIN State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00

Date of Receipt **05 / 30 / 2021**
Transaction ID : A1836A23E8E7E48BCAD7
 Amount of Each Receipt this Period 125.00
 Memo Item

C. KODAK, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1902 HOLLY HILL DRIVE
 City AUSTIN State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A125155319C934ECA930
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1112 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOEHL, JAMED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 SILVERTREE LN
 City REDLANDS State CA Zip Code 92374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A70FA8D526EA247059F4
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KOEHL, JAMED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 SILVERTREE LN
 City REDLANDS State CA Zip Code 92374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AD22C367D0D984222918
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KOENIG, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1042
 City WOODBRIDGE State CA Zip Code 95258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AE757E6FE52C34F28853
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1113 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOERTGE, GALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 LOUISE AVE
 City INDIANAPOLIS State IN Zip Code 46234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A099656B68FE34FBBA11
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KOERTGE, GALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3421 LOUISE AVE
 City INDIANAPOLIS State IN Zip Code 46234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : ACE4663D90D044A0DA42
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074
 City FORT LAUDERDALE State FL Zip Code 33316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 01 / 29 / 2021
Transaction ID : A134520C4094549EEA0F
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1114 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : AB65FE777616D45E7823

Amount of Each Receipt this Period
 25.00

Memo Item

B. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A7A9DA3B295F64349990

Amount of Each Receipt this Period
 250.00

Memo Item

C. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AA5676EB067F44732A74

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1115 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A02C78CB384824D2A8E0

Amount of Each Receipt this Period
 250.00

Memo Item

B. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : ACBE4F82B0AEA481EABE

Amount of Each Receipt this Period
 25.00

Memo Item

C. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A385F2961037B4E819F4

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1116 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A4A9FAB2882FA4F8E8F7

Amount of Each Receipt this Period
 25.00

Memo Item

B. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A5E6D041C5A7D410F907

Amount of Each Receipt this Period
 250.00

Memo Item

C. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : ABB17E17444E0424789A

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1117 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOETHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 757 SE 17TH ST STE 1074

City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : ABFE4129C89DA478AA1C

Amount of Each Receipt this Period
 250.00

Memo Item

B. KOFMEHL, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 S. APRIL CT

City SPOKANE VALLEY	State WA	Zip Code 99216-0339
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF	Occupation (for Individual) GENERAL CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2021
Transaction ID : AAAC4C30585874903ADA

Amount of Each Receipt this Period
 50.00

Memo Item

C. KOFMEHL, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 S. APRIL CT

City SPOKANE VALLEY	State WA	Zip Code 99216-0339
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF	Occupation (for Individual) GENERAL CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 275.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A7E33B24BCA0046B89D7

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1118 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOFMEHL, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2304 S. APRIL CT
 City SPOKANE VALLEY State WA Zip Code 99216-0339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A848918954F4B485A993
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KOGA, PATRICK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 NE FIRST ST
 City GALD State IL Zip Code 61434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A337EFD5460414D05BC6
 Amount of Each Receipt this Period 45.00
 Memo Item

C. KOGA, PATRICK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 NE FIRST ST
 City GALD State IL Zip Code 61434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AA6C4354899FE46BC809
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1119 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOGA, PATRICK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 NE FIRST ST
 City GALD State IL Zip Code 61434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A6CB7736A349E46F7808
 Amount of Each Receipt this Period 45.00
 Memo Item

B. KOJIMA, VABLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3131 FAIR ACRES LN
 City SPRING VALLEY State CA Zip Code 91978
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : AE60CC1A83BB641919DA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KOJIMA, VABLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3131 FAIR ACRES LN
 City SPRING VALLEY State CA Zip Code 91978
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A42C88E9363BC48B9A74
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1120 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOLAR, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2828 OVERLAND WAY
 City EDMOND State OK Zip Code 73012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A030BDB4F3EEF4E6BBC5
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KOLAR, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2828 OVERLAND WAY
 City EDMOND State OK Zip Code 73012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : A3D1B2CFC01344B269F9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KOLLARUS, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 319 44TH STREET
 City LINDENHURST State NY Zip Code 11757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYU WINTHROP HOSPITAL Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AF3B602AC35E4459286D
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1121 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOONS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12705 GUILFORD CIRCLE
 City WELLINGTON State FL Zip Code 33414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AF6E67903743D4824B61
 Amount of Each Receipt this Period 35.00
 Memo Item

B. KOPMEIER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 BLUFF VIEW TER
 City CROSSVILLE State TN Zip Code 38558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 07 / 2021
Transaction ID : ADD1C7C57D4654E3E8B5
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KOPNICKY, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52952 STATE ROUTE 18
 City NEW LONDON State OH Zip Code 44851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 27 / 2021
Transaction ID : A888669DB23A1444F9CD
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 1122 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOSHAKJI, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 WOLFEBORO LANE
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A96DEF003442C4B029D4
 Amount of Each Receipt this Period 35.00
 Memo Item

B. KOSHAKJI, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 WOLFEBORO LANE
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A03F6C5A45B9E44C88AB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KOSHAKJI, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 WOLFEBORO LANE
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A4B5D96E1D4C149DF858
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1123 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOSHAKJI, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 WOLFEBORO LANE
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 04 / 17 / 2021
Transaction ID : A4A2D959838734F919E9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KOSHAKJI, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 WOLFEBORO LANE
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 01 / 2021
Transaction ID : AB7863AAC459940B6861
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KOSHAKJI, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 WOLFEBORO LANE
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A995AF2CA24154718AB5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1124 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOSHAKJI, ANASTASIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 509 WOLFEBORO LANE
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : A56909CDE13BF43C3BA6
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **03 / 01 / 2021**
Transaction ID : A8A739DCA02B44EED8A3
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt **03 / 13 / 2021**
Transaction ID : A2C697338D56E474B947
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1125 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 03 / 26 / 2021
Transaction ID : AC1B5C914D022452B99E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 04 / 13 / 2021
Transaction ID : A230280910B3C4A2FA1B
 Amount of Each Receipt this Period 20.00
 Memo Item

C. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 04 / 26 / 2021
Transaction ID : AF4B7E370567A4910A39
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1126 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A490B1979A2464A73A85
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AC04A1BEB7BC84E5A832
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : AF840F201E7FF4500BB9
 Amount of Each Receipt this Period
 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1127 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOSMAS, PAMELA, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 HILL ST
 City NEW SMYRNA BEACH State FL Zip Code 32169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A9912A67E51804CF79ED
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KOSS, STEIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 E CAMELBACK ROAD
 City PHOENIX State AZ Zip Code 85018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE & ASSOCIATES Occupation (for Individual) REAL ESTATE SALES AND LEASING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A90195987750E45B0A3F
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KOSS, STEIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 E CAMELBACK ROAD
 City PHOENIX State AZ Zip Code 85018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE & ASSOCIATES Occupation (for Individual) REAL ESTATE SALES AND LEASING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2021
Transaction ID : AA35D9942DDCD44F0A4F
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1128 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOSS, STEIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 E CAMELBACK ROAD
 City PHOENIX State AZ Zip Code 85018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE & ASSOCIATES Occupation (for Individual) REAL ESTATE SALES AND LEASING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 31 / 2021**
Transaction ID : AE71B1DB48E7546F6B61
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KOSS, STEIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 E CAMELBACK ROAD
 City PHOENIX State AZ Zip Code 85018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE & ASSOCIATES Occupation (for Individual) REAL ESTATE SALES AND LEASING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : AF39BA549EC324D7B9AD
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KOST, GIGI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20900 WALDRIDGE OAK LN
 City PORTER State TX Zip Code 77365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : AC5B420F5369F426A9D2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1129 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOST, GIGI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20900 WALDRIDGE OAK LN
 City PORTER State TX Zip Code 77365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A1E601BD4DCF044A79CB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KOVACS, SANDOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2099 INDEPENDENCE DR
 City GREENWOOD State IN Zip Code 46143-5642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A0812834732C449C98B2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KOYEN, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 HASTINGS ST
 City BROOKLYN State NY Zip Code 11235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YURY KOYEN, M.D. Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A816A048B95834315B2F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1130 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRAFT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2635 N AZTEC PL
 City CHINO VALLEY State AZ Zip Code 86323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : A7A5D305477904253804
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. KRAFT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2635 N AZTEC PL
 City CHINO VALLEY State AZ Zip Code 86323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : AD9FD67F956C54B2A930
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. KRAMIEN, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17600 NE OLDS LN
 City NEWBERG State OR Zip Code 97132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A6A1C7A9194BA41C3848
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1131 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRAUSE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12444 SOUTH WEST GREEN DR
 City CULVER State OR Zip Code 97734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2021
Transaction ID : AE95A8B76886B40BA994
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. KRAUSE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12444 SOUTH WEST GREEN DR
 City CULVER State OR Zip Code 97734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2021
Transaction ID : AEF9225C6D8754CEC829
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. KRAUSE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12444 SOUTH WEST GREEN DR
 City CULVER State OR Zip Code 97734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : A229C5E0AE19F448499A
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1132 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRAUSE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12444 SOUTH WEST GREEN DR
 City CULVER State OR Zip Code 97734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : ADB6DBF4E4DB14BF5A38
 Amount of Each Receipt this Period 250.00
 Memo Item

B. KRAUSE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12444 SOUTH WEST GREEN DR
 City CULVER State OR Zip Code 97734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : A9CB70D1E821D4DC1A61
 Amount of Each Receipt this Period 250.00
 Memo Item

C. KRAUSE, DARYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12444 SOUTH WEST GREEN DR
 City CULVER State OR Zip Code 97734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A8E609E172DA3471C85A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1133 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRAUTSCHUN, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 157

City SPEARFISH	State SD	Zip Code 57783
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF		Occupation (for Individual) FINANCIAL ADVISOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : A0054D9924A98489BBB1

Amount of Each Receipt this Period
 100.00

Memo Item

B. KRAUTSCHUN, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 157

City SPEARFISH	State SD	Zip Code 57783
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF		Occupation (for Individual) FINANCIAL ADVISOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A7CD8B9B21BCB49F9A69

Amount of Each Receipt this Period
 100.00

Memo Item

C. KREGER, JOE, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20515 W OAKLAND

City TONKAWA	State OK	Zip Code 74653
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) KREGER RANCH,LLC		Occupation (for Individual) CATTLE RANCHER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A0B7590EF99354D85A33

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1134 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRENEK, BRYANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 839 CR 3271W
 City MOUNT ENTERPRISE State TX Zip Code 75681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A27DEF0ED5F224CBF84A
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. KROEPER, EILEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3436 AUBURNDALE AVE
 City THE VILLAGES State FL Zip Code 32162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : ACCCD5C08E84F41DF834
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. KRUEGER, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3830 46 TH AVENUE SOUTH
 City SAINT PETERSBURG State FL Zip Code 33711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021
Transaction ID : A5AEF0B0965F8486FBEB
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1135 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRUEGER, LEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3830 46 TH AVENUE SOUTH
 City SAINT PETERSBURG State FL Zip Code 33711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A0F5DFA2DC3884320834
 Amount of Each Receipt this Period 35.00
 Memo Item

B. KRUSE, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9116 JERGEN BAY S
 City COTTAGE GROVE State MN Zip Code 55016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NICOR LIGHTING Occupation (for Individual) SALES MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A30670C9F829145A5B86
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KRUSE, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9116 JERGEN BAY S
 City COTTAGE GROVE State MN Zip Code 55016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NICOR LIGHTING Occupation (for Individual) SALES MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AAC1E6AOCF10B41829DA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1136 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO State MN Zip Code 56001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2021

Transaction ID : A4A2BF78F79D74BC7A25

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO State MN Zip Code 56001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2021

Transaction ID : AAE1EDCE21A3B4DE1A0F

Amount of Each Receipt this Period
75.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO State MN Zip Code 56001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021

Transaction ID : AD1450EFF7FD14DB796F

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1137 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO State MN Zip Code 56001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2021

Transaction ID : A9C9C44522A3E4D31975

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO State MN Zip Code 56001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 04 / 2021

Transaction ID : A6B63A98F1E474671974

Amount of Each Receipt this Period
75.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO State MN Zip Code 56001

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 04 / 2021

Transaction ID : AEE5A68B8191E44C8996

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1138 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO	State MN	Zip Code 56001
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021

Transaction ID : A2D73AB7A73364BB1910

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRUSE, THERESA, L., ,

Mailing Address 216 TERRACE DRIVE

City MANKATO	State MN	Zip Code 56001
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021

Transaction ID : A0407F14495F447EEA8A

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KRYKA, THOMAS, , ,

Mailing Address 1940 E LAGUNA DR.

City TEMPE	State AZ	Zip Code 85282
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARICOPA COUNTY ARIZONA	Occupation (for Individual) COURT RECORDING MONITOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021

Transaction ID : AFC52E3AD191D41DDAEC

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1139 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRYKA, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1940 E LAGUNA DR.
 City TEMPE State AZ Zip Code 85282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARICOPA COUNTY ARIZONA Occupation (for Individual) COURT RECORDING MONITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A1E5DAFE2EE7C4C1CB72
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KUBICKI, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9930 GAYNOR AVENUE
 City NORTH HILLS State CA Zip Code 91343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A7726F802B876497FAA7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KUBICKI, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9930 GAYNOR AVENUE
 City NORTH HILLS State CA Zip Code 91343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 02 / 2021
Transaction ID : ABA38D151A3EC430F907
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1140 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KUBICKI, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9930 GAYNOR AVENUE
 City NORTH HILLS State CA Zip Code 91343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : ABB00985A35454DAE9C2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KUBICKI, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9930 GAYNOR AVENUE
 City NORTH HILLS State CA Zip Code 91343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AB61196A066864116885
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KUBINA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 JEFFERSON DR
 City FAYETTE CITY State PA Zip Code 15438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A727C5BB0B26B4E6E927
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1141 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KUBINA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 JEFFERSON DR
 City FAYETTE CITY State PA Zip Code 15438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A6AD56B90BBBD444AA1E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KUBINA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 JEFFERSON DR
 City FAYETTE CITY State PA Zip Code 15438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A3694AAEA8B7C4B6DACE
 Amount of Each Receipt this Period 25.00
 Memo Item

C. KUBINA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 198 JEFFERSON DR
 City FAYETTE CITY State PA Zip Code 15438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A93CD6C160A0441E6A18
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1142 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KUBOTA, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 GRAYNOLD AVENUE
 City GLENDALE State CA Zip Code 91202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A744D2AE831AC4836BD8
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. KUBOTA, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 GRAYNOLD AVENUE
 City GLENDALE State CA Zip Code 91202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : A6514FBD081944355888
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KUBOTA, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 GRAYNOLD AVENUE
 City GLENDALE State CA Zip Code 91202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A76088B13899A4935A2D
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1143 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KUBOTA, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 912 GRAYNOLD AVENUE

City GLENDALE	State CA	Zip Code 91202
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2021

Transaction ID : A4FFC4B33FE97448FA52

Amount of Each Receipt this Period
100.00

Memo Item

B. KUHLMORST, ERIC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 810 COLUMBINE CIRCLE

City AUBURN	State IN	Zip Code 46706
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2021

Transaction ID : A48D77F04B5744678BD4

Amount of Each Receipt this Period
35.00

Memo Item

C. KURIS, SONIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 HOLT AVE

City GLEN ROCK	State NJ	Zip Code 07452
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMEX	Occupation (for Individual) SR MGR
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2021

Transaction ID : AA73A8286229A4391944

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1144 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KURIS, SONIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 HOLT AVE
 City GLEN ROCK State NJ Zip Code 07452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMEX Occupation (for Individual) SR MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A39B9EA82CCC84E9997E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KURTZ, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6360 EVERGREEN DRIVE
 City INDEPENDENCE State OH Zip Code 44131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A0BA83324BBC84E29881
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KURZET, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33762 VALLE ROAD
 City SAN JUAN CAPISTRANO State CA Zip Code 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 26 / 2021
Transaction ID : A78087D28A0E5410293D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1145 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KVAM, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 COLONY ROAD
 City WEST HARTFORD State CT Zip Code 06117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARTFORD HEALTHCARE Occupation (for Individual) NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : AB4AD426E818245A3841
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LABBERTON, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 NOTTINGHAM CIRCLE
 City GULFPORT State MS Zip Code 39503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : AD51CEF8754684246B4B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LABERGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 LA POSTA
 City ENCINITAS State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : AF9314B0813134538822
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1146 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LABERGE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1503 LA POSTA
 City ENCINITAS State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A61EF73BEB35842649A2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LABRAGA, MARIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 RESERVOIR AVE
 City NORWALK State CT Zip Code 06850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2021
Transaction ID : AC78325AA64DF4D36B8B
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. LABRAGA, MARIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 RESERVOIR AVE
 City NORWALK State CT Zip Code 06850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A458FF43C08C04097901
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1147 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LABRAGA, MARIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 RESERVOIR AVE
 City NORWALK State CT Zip Code 06850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021
Transaction ID : ACD99F888C24F4ABBBFE
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LABRAGA, MARIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 RESERVOIR AVE
 City NORWALK State CT Zip Code 06850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A5D04269BC3C54F31BC3
 Amount of Each Receipt this Period 25.00
 Memo Item

C. LABRAGA, MARIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 RESERVOIR AVE
 City NORWALK State CT Zip Code 06850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : A26BBA66F77B04680BA1
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1148 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LABRIE, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1326 32RD
 City MINDEN State NE Zip Code 68959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MADSEN FARMS Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A35FA06ACB1394F66A7E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LACY, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16397 SHERIDAN DR.
 City PARKER State CO Zip Code 80134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A37BAFE32C87C43EC9CB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LACY, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16397 SHERIDAN DR.
 City PARKER State CO Zip Code 80134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AC173012B76134C6BA4B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1149 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LADSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32842 WIDGEON ROAD
 City OCEAN VIEW State DE Zip Code 19970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AFD492D05016D498F8A1
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LADSON, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32842 WIDGEON ROAD
 City OCEAN VIEW State DE Zip Code 19970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A37F0A8CC7C6940FB839
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LAFAY, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4251 GULF SHORE BLVD N
 APT 9C
 City NAPLES State FL Zip Code 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : A977F91C8262D41E78D9
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1150 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAFAY, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4251 GULF SHORE BLVD N
 APT 9C
 City NAPLES State FL Zip Code 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : A62955D7503954E239A4
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LAFAY, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4251 GULF SHORE BLVD N
 APT 9C
 City NAPLES State FL Zip Code 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A1C82A8AB0D484C848D5
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. LAFAY, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4251 GULF SHORE BLVD N
 APT 9C
 City NAPLES State FL Zip Code 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A0D6B37129738480092E
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1151 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAFRANCE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 NE 123RD AVE
 City VANCOUVER State WA Zip Code 98684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A0C1DA0E4DD2F490C9A5
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LAGANAS, ELIZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 SHORE DRIVE
 City MERRICK State NY Zip Code 11566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LAW OFFICE OF ELIZA D. STAHL Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : A8337B23D140C4B948F1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LAGANAS, ELIZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 SHORE DRIVE
 City MERRICK State NY Zip Code 11566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LAW OFFICE OF ELIZA D. STAHL Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A325500F5E99247B0A19
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1152 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAGOGLIA, GERTRUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 150596

City BROOKLYN	State NY	Zip Code 11215
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A2D2578C9796643D38C2

Amount of Each Receipt this Period
 1500.00

Memo Item

B. LAHUE, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 W POPPY HILLS CIRCLE

City SAINT GEORGE	State UT	Zip Code 84790
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : ABFF7D7EF9C234A1BBC4

Amount of Each Receipt this Period
 50.00

Memo Item

C. LAHUE, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1569 W POPPY HILLS CIRCLE

City SAINT GEORGE	State UT	Zip Code 84790
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A7AA02D5E66D545C8B1A

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1153 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAI, EVALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1918 LUDLOW LANE
 City ORLANDO State FL Zip Code 32839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISNEY Occupation (for Individual) MAXIMO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AAC1F56BF7814D5CA45
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LAKE, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 SO. FOOTHILL DRIVE STE 25
 City SALT LAKE CITY State UT Zip Code 84108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 23 / 2021
Transaction ID : A41F2C2E2F1994DF4BB1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LAKE, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 SO. FOOTHILL DRIVE STE 25
 City SALT LAKE CITY State UT Zip Code 84108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A72167DA6FB094A4DB1E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1154 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAKE, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 SO. FOOTHILL DRIVE
 STE 25
 City SALT LAKE CITY State UT Zip Code 84108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A9A24399ECB674911A01
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LAKE, CHRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 SO. FOOTHILL DRIVE
 STE 25
 City SALT LAKE CITY State UT Zip Code 84108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021
Transaction ID : A46A27F63C2914FAA878
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. LAKILAK, CARMELITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 SAN JOSE AVE
 City SAN FRANCISCO State CA Zip Code 94112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AD6CDDDB33F94B4B7D84D
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1155 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAMBERGS TOMES, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 POPE ROAD
 City ACTON State MA Zip Code 01720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANNA REALTY CORPORATION Occupation (for Individual) REAL ESTATE MGT & OWNERSHIP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : ACFA121CCA9C34C2E9EC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LAMBERGS TOMES, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 POPE ROAD
 City ACTON State MA Zip Code 01720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANNA REALTY CORPORATION Occupation (for Individual) REAL ESTATE MGT & OWNERSHIP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AAC00B183F80B4023A85
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LAMBERT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4099 NE WITTMER RD
 City PRINEVILLE State OR Zip Code 97754-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : AD86B273E69254CBF818
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1156 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAMBERT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4099 NE WITTMER RD
 City PRINEVILLE State OR Zip Code 97754-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A32C04BB6E5FE458D9B9
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LAMBERT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4099 NE WITTMER RD
 City PRINEVILLE State OR Zip Code 97754-8147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : AFBA9848500B545A4B28
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. LAMB, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2714 APACHE TRL
 City SOPHIA State NC Zip Code 27350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A68DEA5CDAD0F46E6B87
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1157 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAMB, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2714 APACHE TRL
 City SOPHIA State NC Zip Code 27350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A116B431032654F43956
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LAMB, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 TERRELL CIRCLE
 City GREENSBORO State GA Zip Code 30642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BATORY FOODS Occupation (for Individual) VP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : AAAE823F3E2D0495EA51
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LAMB, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1081 TERRELL CIRCLE
 City GREENSBORO State GA Zip Code 30642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BATORY FOODS Occupation (for Individual) VP SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AB3AD5F30E0AB4F18A58
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1158 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LAMEY, MARY ANN, , ,

Mailing Address 14884 TEALWOOD COURT

City EDEN PRAIRIE	State MN	Zip Code 55347
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2021

Transaction ID : A8FBB1B3807C2495D8FF

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LAMEY, MARY ANN, , ,

Mailing Address 14884 TEALWOOD COURT

City EDEN PRAIRIE	State MN	Zip Code 55347
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2021

Transaction ID : A619EB08CA19D4635A3B

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LAMEY, MARY ANN, , ,

Mailing Address 14884 TEALWOOD COURT

City EDEN PRAIRIE	State MN	Zip Code 55347
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2021

Transaction ID : AEA280147E4D04D8BB31

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1159 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAMEY, MARY ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14884 TEALWOOD COURT
 City EDEN PRAIRIE State MN Zip Code 55347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A253363E454644CF7A59
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LAMEY, MARY ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14884 TEALWOOD COURT
 City EDEN PRAIRIE State MN Zip Code 55347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt 05 / 21 / 2021
Transaction ID : AD4A42567E1054D08BDD
 Amount of Each Receipt this Period 10.00
 Memo Item

C. LAMEY, MARY ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14884 TEALWOOD COURT
 City EDEN PRAIRIE State MN Zip Code 55347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AFB208B8C8E644F44BCC
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1160 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAMPE, CYNDEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8543 MALLARD COURT
 City LITTLETON State CO Zip Code 80126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO BELOW ZERO Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A4E38773D47534F0383E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LAMPE, CYNDEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8543 MALLARD COURT
 City LITTLETON State CO Zip Code 80126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO BELOW ZERO Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2021
Transaction ID : AAC0D58CC4A454388932
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LANCY, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14751 BIRCHWOOD PLACE
 City ANAHEIM State CA Zip Code 92801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIDGFORD FOODS CORPORATION Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AF850D099B65042F1A26
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1161 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LANCY, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14751 BIRCHWOOD PLACE
 City ANAHEIM State CA Zip Code 92801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRIDGFORD FOODS CORPORATION Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A871EB10216144F9E9A4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A61E99CC588564AA68AC
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 03 / 2021
Transaction ID : A437E517071214C5DBA4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1162 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : A09DD1B44A7A445B5954
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : A4487E38365CA423A9C4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A5C60238DA29046AEA8F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1163 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAND, EDGAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 FERN DR

City PAINESVILLE	State OH	Zip Code 44077
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RACE WINNING BRANDS	Occupation (for Individual) CNC MACHINE OPERATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		17		2021

Transaction ID : A678BC8CFA28D4639B3D

Amount of Each Receipt this Period
35.00

Memo Item

B. LAND, EDGAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 FERN DR

City PAINESVILLE	State OH	Zip Code 44077
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RACE WINNING BRANDS	Occupation (for Individual) CNC MACHINE OPERATOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2021

Transaction ID : AB57BD00AB5864C6B9F0

Amount of Each Receipt this Period
35.00

Memo Item

C. LAND, EDGAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 FERN DR

City PAINESVILLE	State OH	Zip Code 44077
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RACE WINNING BRANDS	Occupation (for Individual) CNC MACHINE OPERATOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : A2E28B25DA9C1462C97F

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1164 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : AA408370593E44B8DBD7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A539EEF5CE3D048F0B42
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A86D5200C4CEE422C82F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1165 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAND, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 FERN DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RACE WINNING BRANDS Occupation (for Individual) CNC MACHINE OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AF45CE7DB443F411ABEA
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LANE, CATHARINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9595
 City AMARILLO State TX Zip Code 79105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A09ED0C89E1AE4B6AB1A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LANFER, STEPHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 SEA MEADOWS LANE
 City YARMOUTH State ME Zip Code 04096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROTEIN HOLDINGS, INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 25 / 2021
Transaction ID : AB74891D824C448A98CF
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1166 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LANFER, STEPHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 SEA MEADOWS LANE
 City YARMOUTH State ME Zip Code 04096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROTEIN HOLDINGS, INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **05 / 29 / 2021**
Transaction ID : AC05E8E11625C46A8836
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LANFER, STEPHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 SEA MEADOWS LANE
 City YARMOUTH State ME Zip Code 04096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROTEIN HOLDINGS, INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **06 / 16 / 2021**
Transaction ID : AAE3D827EC9B54071BF1
 Amount of Each Receipt this Period 20.00
 Memo Item

C. LANFER, STEPHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 SEA MEADOWS LANE
 City YARMOUTH State ME Zip Code 04096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROTEIN HOLDINGS, INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt **06 / 24 / 2021**
Transaction ID : A1F356A7113A747FBB37
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1167 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LANFER, STEPHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 SEA MEADOWS LANE
 City YARMOUTH State ME Zip Code 04096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROTEIN HOLDINGS, INC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A8208C99245E3434A917
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LANGE, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 78TH ST W
 City SEA ISLE CITY State NJ Zip Code 08243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A81E16D1FBD11455A9A3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LANGE, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 78TH ST W
 City SEA ISLE CITY State NJ Zip Code 08243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A69B10D3CF7744414851
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1168 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LANGE-RICHARDS, KATARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 E CACTUS RD
 City SCOTTSDALE State AZ Zip Code 85259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : AC4FF541E36574D12984
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LANGE-RICHARDS, KATARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10800 E CACTUS RD
 City SCOTTSDALE State AZ Zip Code 85259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : A56360A06D3844F0DBA0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LANG, FERNANDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 BUENA VISTA
 City BENICIA State CA Zip Code 94510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED THE BEST WORKSHOP Occupation (for Individual) FURNITURE REFINISHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 09 / 2021**
Transaction ID : AF9763857733A433791E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1169 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LANG, FERNANDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 BUENA VISTA
 City BENICIA State CA Zip Code 94510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED THE BEST WORKSHOP Occupation (for Individual) FURNITURE REFINISHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : AC06E627448224424B17
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LANGSWEIRD, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3110 STATE 84 NE
 City LONGVILLE State MN Zip Code 56655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A2B429A4E01CF47CFA7B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LANGSWEIRD, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3110 STATE 84 NE
 City LONGVILLE State MN Zip Code 56655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AEE4B257A766C49C2822
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1170 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LARKINS, KEVIN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2044 JONES CREEK RD

City WHITE BLUFF	State TN	Zip Code 37187
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) LARKINS LOGGING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2021

Transaction ID : A045FFDA3A31741EFA22

Amount of Each Receipt this Period
50.00

Memo Item

B. LARKINS, KEVIN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2044 JONES CREEK RD

City WHITE BLUFF	State TN	Zip Code 37187
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) LARKINS LOGGING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : A7DE76368C8794EFC8C

Amount of Each Receipt this Period
50.00

Memo Item

C. LAROQUE, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 311

City LINCOLN	State MT	Zip Code 59639
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2021

Transaction ID : A8EBCF07C96044185ADA

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1171 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAROQUE, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 311
 City LINCOLN State MT Zip Code 59639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A286987C9720945A798D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LAROQUE, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 311
 City LINCOLN State MT Zip Code 59639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : AFEEA15665744243368F0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LAROSSA, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 NORM AVE SUITE 5
 City BEDFORD HILLS State NY Zip Code 10507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) ELECTRICAL CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A1811EA6A598C450392C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1172 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAROSSA, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 NORM AVE
 SUITE 5
 City BEDFORD HILLS State NY Zip Code 10507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) ELECTRICAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 03 / 2021
Transaction ID : AD09DBFC8B8CB48FF9F9
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LARRABEE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 565 EL CAMINO REAL. #7201
 City NAPLES State FL Zip Code 34119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : AA5D2A7FEAD8840FE82E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LARRABEE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 565 EL CAMINO REAL. #7201
 City NAPLES State FL Zip Code 34119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AB88527320EA64EBA87C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1173 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : ADB204575AFD243D6B94
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A5377AA0EF3FF4A928A5
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A58046951994D4720BC5
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1174 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AFE80263B70AB4FF1AC7
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : AF2B2856FF3D649C3BA9
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : AD088F319832D42EA9AD
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1175 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **06 / 19 / 2021**
Transaction ID : A874F0B00686846FA9A7
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LARSON, MADELEINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 8297
 City ASPEN State CO Zip Code 81612-8297
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **06 / 23 / 2021**
Transaction ID : A7F1948E2362D41D7945
 Amount of Each Receipt this Period 15.00
 Memo Item

C. LAUER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 OLD GEORGETOWN RD
 City GATESVILLE State TX Zip Code 76528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 21 / 2021**
Transaction ID : ABEE576B2DC5743398F5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1176 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAUER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 OLD GEORGETOWN RD
 City GATESVILLE State TX Zip Code 76528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AE0524CD087F74A00A14
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LAURANCE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12500 MARION LANE WEST 4119
 City HOPKINS State MN Zip Code 55305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AB3E3CF885CF34D84A59
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LAURIN, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24583 MILLCREEK DR
 City FARMINGTON HILLS State MI Zip Code 48336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 23 / 2021
Transaction ID : A1F2660CC5444449F89B
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1177 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAWLOR, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1637 THISTLEWOOD DRIVE
 City WASHINGTON CROSSING State PA Zip Code 18977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : A5C9B1FB3A2B542FAAA5
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LAWLOR, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1637 THISTLEWOOD DRIVE
 City WASHINGTON CROSSING State PA Zip Code 18977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : A0BE7F1BBED9949CE80A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LAWMASER, DARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20031 S 129TH AVE
 City SAPULPA State OK Zip Code 74066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : A810651ADB01B4DE9814
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1178 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAW, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24501 PARAMOUNT DR
 City TEHACHAPI State CA Zip Code 93561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOUNDATION SECURITY GROUP Occupation (for Individual) EXECUTIVE PROTECTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AE03E250123804219AF3
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LAWRENCE, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 457 EAST ARROW HIGHWAY
 City AZUSA State CA Zip Code 91702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWRENCE EQUIPMENT INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : A9318E373006A498BAE2
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LAWRENCE, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 457 EAST ARROW HIGHWAY
 City AZUSA State CA Zip Code 91702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWRENCE EQUIPMENT INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 14 / 2021
Transaction ID : AEA2C1B9C046842FC8DF
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1179 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAWRENCE, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 457 EAST ARROW HIGHWAY
 City AZUSA State CA Zip Code 91702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWRENCE EQUIPMENT INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 14 / 2021**
Transaction ID : A5E8A0AF328904F2A9B0
 Amount of Each Receipt this Period 250.00
 Memo Item

B. LAWRENCE, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 457 EAST ARROW HIGHWAY
 City AZUSA State CA Zip Code 91702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWRENCE EQUIPMENT INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : AA0DC3A5BC1C444E395D
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LAWRENCE, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 457 EAST ARROW HIGHWAY
 City AZUSA State CA Zip Code 91702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWRENCE EQUIPMENT INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : A2834A26815A14AE9AC7
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1180 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAWSON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1092
 City FOREST CITY State NC Zip Code 28043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2021
Transaction ID : A96469C9FEDB14EEF9EC
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. LAWYER, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2023 S. CORONA AVE
 City COLORADO SPRINGS State CO Zip Code 80905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : ABCF96B9F82FA4C0686C
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. LAY, LILLIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1836 CATLIN ST
 City FULLERTON State CA Zip Code 92833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LA MIRADA FAMILY DENTAL Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AD2BE5890424E4AE4BD5
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1181 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LAZCANO, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8441 COMET ST.
 City RANCHO CUCAMONGA State CA Zip Code 91730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : A0D5E05E991AA427B8B2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LEACH, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3629 MORMON COULEE RD F
 City LA CROSSE State WI Zip Code 54601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : AF483B26B0E3D4948A7D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LEACH, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3629 MORMON COULEE RD F
 City LA CROSSE State WI Zip Code 54601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : ACE1E92891D2148DAAC9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1182 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AA467C5A50CA544608ED
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A81EB73884E2042CEA33
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A46B104F545A0448E9B8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1183 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : AC37960725B0D4819A96
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A37C4E22F098E42349BC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A5D403F18459A4776B96
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1184 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A69E50D8C4A494AC794E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LEAVITT, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9170 DONNYBROOK CT
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : ACBAEF3E818344737AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LEBARD, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 BARSDALE AVE
 City FILLMORE State CA Zip Code 93015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FILLMORE RENTALS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AA605327E9D4548F58EF
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1185 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEBLANC, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 MORNING CREEK PLACE
 City GREENVILLE State SC Zip Code 29607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLUOR Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A58A7871A2C314DEF933
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LECHNER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N3997 STATE ROAD 25
 City MENOMONIE State WI Zip Code 54751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 28 / 2021
Transaction ID : ABB4B19DE1CD1487CA4E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LECHNER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N3997 STATE ROAD 25
 City MENOMONIE State WI Zip Code 54751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A286AE2AA4DC24FBF874
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1186 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LECHNER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N3997 STATE ROAD 25
 City MENOMONIE State WI Zip Code 54751
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A13C16E3B5C0C4BD6BA5
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LECHNER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N3997 STATE ROAD 25
 City MENOMONIE State WI Zip Code 54751
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A1C4D0C626896442693C
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. LEE, KEUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 OXFORD LANE
 City CHALFONT State PA Zip Code 18194
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NTAC FORTIS LLC Occupation (for Individual) NETWORK FIREWALL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A70BBE2C6BA9F4B34B62
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1187 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9612 SCOTSTOUN DR.
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTERLY MARINE INC. Occupation (for Individual) BOAT BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A0E01E856E8804773A97
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LEHMAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24425 TRYON
 City CHANNAHON State IL Zip Code 60410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AACF28D7BA874434E8E0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. LEHMAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24425 TRYON
 City CHANNAHON State IL Zip Code 60410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A5BCD601111B04494ACE
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1188 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEIGHTON, NORMA, , ,

Mailing Address **23862 VILLENA**

City MISSION VIEJO	State CA	Zip Code 92692
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 19 / 2021

Transaction ID : AE3032A258ED3402DBFE

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEIGHTON, NORMA, , ,

Mailing Address **23862 VILLENA**

City MISSION VIEJO	State CA	Zip Code 92692
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
05 / 19 / 2021

Transaction ID : A6CAE25DF3B064B73A01

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEIGHTON, NORMA, , ,

Mailing Address **23862 VILLENA**

City MISSION VIEJO	State CA	Zip Code 92692
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
06 / 19 / 2021

Transaction ID : AF5ACAD637A6F4CF981E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1189 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEINWEBER, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 PINNEYS CT
 City CHESTERTON State IN Zip Code 46304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.75

Date of Receipt 01 / 19 / 2021
Transaction ID : A23C7C68DAF2C4BF0AB1
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LEINWEBER, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 PINNEYS CT
 City CHESTERTON State IN Zip Code 46304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 318.75

Date of Receipt 02 / 11 / 2021
Transaction ID : A9378A0A08ACF47BE86E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LEINWEBER, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 PINNEYS CT
 City CHESTERTON State IN Zip Code 46304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.75

Date of Receipt 03 / 11 / 2021
Transaction ID : A6565A4EC25504705874
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1190 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEINWEBER, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 PINNEYS CT
 City CHESTERTON State IN Zip Code 46304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : A7E89222CA69D4299AAA
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LEINWEBER, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 PINNEYS CT
 City CHESTERTON State IN Zip Code 46304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 518.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2021
Transaction ID : A9C004BC33BE24A54BA7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LEINWEBER, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 PINNEYS CT
 City CHESTERTON State IN Zip Code 46304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 618.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A29B3F3E4B70A41A1A5E
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1191 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEISEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 PEACOCK DRIVE
 City SAN RAFAEL State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : AF28A4DD5AD2E427F8D5
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LEISEY, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 PEACOCK DRIVE
 City SAN RAFAEL State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : A1C25AE0EFE294F41A28
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LELLI, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 TUG HOLLOW ROAD
 City WEST KINGSTON State RI Zip Code 02892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DRYVIT Occupation (for Individual) CHEMIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AF2FB9C1BD3A34291A66
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 1192 OF 3012
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEMSTROM, NEIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 9346 E. TYLER RD.
City WHEELER State MI Zip Code 48662
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 250.00

Date of Receipt
05 / 17 / 2021
Transaction ID : AC0F4680A99D64165923
Amount of Each Receipt this Period
50.00
Memo Item

B. LEOMBRUNO, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2410 BERKSHIRE CT
City KISSIMMEE State FL Zip Code 34746
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 210.00

Date of Receipt
06 / 30 / 2021
Transaction ID : A2D3875B8C24D42A6A78
Amount of Each Receipt this Period
35.00
Memo Item

C. LEONARD, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1904 LYNN TREE CT
City HIGH POINT State NC Zip Code 27265
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 210.00

Date of Receipt
06 / 02 / 2021
Transaction ID : A9542E5636A5544BE946
Amount of Each Receipt this Period
35.00
Memo Item

SUBTOTAL of Receipts This Page (optional)..... 120.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1193 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEONARD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 BLACKHAWK CLUB DRIVE
 City DANVILLE State CA Zip Code 94506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 24 / 2021**
Transaction ID : A72ADEC9B1AD3453FB0F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LEONARD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 BLACKHAWK CLUB DRIVE
 City DANVILLE State CA Zip Code 94506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : AD0F198B53C3A4A6F8F8
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LEONARD, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 BLACKHAWK CLUB DRIVE
 City DANVILLE State CA Zip Code 94506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 24 / 2021**
Transaction ID : AE96D3D68DEF44C44B80
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1194 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEONHARDT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2368 VICTORY AVE
 City TOLEDO State OH Zip Code 43607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOME DEPOT Occupation (for Individual) PRO DESK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : A67ECABED85D44C7E82E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LETT, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIRNAM WOOD STREET
 City LOOGOOTEE State IN Zip Code 47553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **03 / 27 / 2021**
Transaction ID : AB60BB7046A454B2B8C8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LETT, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIRNAM WOOD STREET
 City LOOGOOTEE State IN Zip Code 47553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : A4684955371C342B5A22
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1195 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LETT, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIRNAM WOOD STREET
 City LOOGOOTEE State IN Zip Code 47553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : AFEC87B67D8BA439CAA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LETT, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIRNAM WOOD STREET
 City LOOGOOTEE State IN Zip Code 47553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **05 / 18 / 2021**
Transaction ID : A28329C7816854CB0ACB
 Amount of Each Receipt this Period 25.00
 Memo Item

C. LETT, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIRNAM WOOD STREET
 City LOOGOOTEE State IN Zip Code 47553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : AB181FE50B6AD4C4E988
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1196 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LETT, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIRNAM WOOD STREET
 City LOOGOOTE E State IN Zip Code 47553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **06 / 18 / 2021**
Transaction ID : A35B8DE4942A341DFBEB
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LETT, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 BIRNAM WOOD STREET
 City LOOGOOTE E State IN Zip Code 47553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **06 / 27 / 2021**
Transaction ID : A978F584A1DB1421AA87
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LEVAN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 LINDAVER LA
 City SAN ANTONIO State TX Zip Code 78260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 11 / 2021**
Transaction ID : ACA34E1763A254DD1B61
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1197 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEVINE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 EAST 83RD ST. #4F
 City NEW YORK State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 14 / 2021
Transaction ID : AF179D9AF50F94A4A99B
 Amount of Each Receipt this Period 500.00
 Memo Item

B. LEVIN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12274 1ST ST. W. 2
 City SAINT PETERSBURG State FL Zip Code 33706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES AND MRKTG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 18 / 2021
Transaction ID : AFD57763C482344DBA90
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LEVIN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12274 1ST ST. W. 2
 City SAINT PETERSBURG State FL Zip Code 33706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES AND MRKTG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 18 / 2021
Transaction ID : ABB903173132D4B70B2F
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1198 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEVIN, STEPHEN, , ,

Mailing Address 12274 1ST ST. W.
 2

City SAINT PETERSBURG State FL Zip Code 33706

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) SALES AND MRKTG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 03 / 18 / 2021
Transaction ID : AB7012BD5F4ED4035908

Amount of Each Receipt this Period
 50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEVIN, STEPHEN, , ,

Mailing Address 12274 1ST ST. W.
 2

City SAINT PETERSBURG State FL Zip Code 33706

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) SALES AND MRKTG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 03 / 18 / 2021
Transaction ID : ACA104F2EFE1E406A9AB

Amount of Each Receipt this Period
 100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEVIN, STEPHEN, , ,

Mailing Address 12274 1ST ST. W.
 2

City SAINT PETERSBURG State FL Zip Code 33706

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) SALES AND MRKTG

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 04 / 18 / 2021
Transaction ID : AD6E5FEAD8E914A2BBC1

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1199 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEVIN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12274 1ST ST. W.
 2
 City SAINT PETERSBURG State FL Zip Code 33706
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES AND MRKTG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : A5CA2E6EB6CF047B5B54
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LEWIS, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14751 N KELSEY ST
 STE105-565
 City MONROE State WA Zip Code 98272
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SUNBACKER FIBERGLASS INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : AC5F2D18954EE44EB8FF
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LEWIS, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14751 N KELSEY ST
 STE105-565
 City MONROE State WA Zip Code 98272
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SUNBACKER FIBERGLASS INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AD9261CCC083441BCB1C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1200 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **02 / 26 / 2021**
Transaction ID : A88F0BE5F40CA4268BC5
 Amount of Each Receipt this Period 15.00
 Memo Item

B. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **03 / 06 / 2021**
Transaction ID : AE7FCF287F96C42D8AD0
 Amount of Each Receipt this Period 10.00
 Memo Item

C. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **03 / 07 / 2021**
Transaction ID : A348D8BC848E74143ABB
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1201 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 10 / 2021
Transaction ID : A3695E098A4AD499CAA6
 Amount of Each Receipt this Period 15.00
 Memo Item

B. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 03 / 14 / 2021
Transaction ID : AF60A268DB01D4E4DDB1
 Amount of Each Receipt this Period 25.00
 Memo Item

C. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : AF265C4D3142E415AAAB
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1202 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, ASHLEY, W, ,

Mailing Address 25320 MALIBU RD

City MALIBU State CA Zip Code 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2021

Transaction ID : A4C67337954E24409A2D

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, ASHLEY, W, ,

Mailing Address 25320 MALIBU RD

City MALIBU State CA Zip Code 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 06 / 2021

Transaction ID : AA1F2394864BB4EB192B

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, ASHLEY, W, ,

Mailing Address 25320 MALIBU RD

City MALIBU State CA Zip Code 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2021

Transaction ID : A029F20EF6AD3419F9D2

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1203 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2021
Transaction ID : A7692A295273A4403A09
 Amount of Each Receipt this Period 15.00
 Memo Item

B. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : A6CA9C69F51204BF09FC
 Amount of Each Receipt this Period 25.00
 Memo Item

C. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : AC2C1C3322A8C49119A6
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1204 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : A7EAE82C98A4647C0BDE
 Amount of Each Receipt this Period 15.00
 Memo Item

B. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : A344825A0F8CC412DAC8
 Amount of Each Receipt this Period 15.00
 Memo Item

C. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 24 / 2021**
Transaction ID : ACB05F08A4FEE419AB32
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1205 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : AD3A3A16B24024852B68
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. LEWIS, ASHLEY, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25320 MALIBU RD
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A56A301E1582F4B3B9A2
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. LEWIS, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1728 E. Kael ST
 City MESA State AZ Zip Code 85203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMAX INFINITY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A8B942A5A19424228B24
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1206 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1728 E. Kael ST
 City MESA State AZ Zip Code 85203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMAX INFINITY Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A158BE28B7DC140F98A4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 02 / 06 / 2021
Transaction ID : AA5E3ED98D24C4581A9D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 10 / 2021
Transaction ID : A979AC0033C9A49C4893
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1207 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2021

Transaction ID : AA790F7969967405E9FA

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2021

Transaction ID : A5E59DC3A03A8450A8AD

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2021

Transaction ID : A45EC1452F28E454AA04

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1208 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2021

Transaction ID : AC6EB0E07EDB04F4E82B

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2021

Transaction ID : AE4DE8AFB2C884A97AF4

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2021

Transaction ID : A23B697DC5E26473CB9B

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1209 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 465.00

Date of Receipt
 03 / 24 / 2021
Transaction ID : A61AC229693CB4DEB8B0

Amount of Each Receipt this Period
 35.00

Memo Item

B. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 490.00

Date of Receipt
 04 / 04 / 2021
Transaction ID : A174517CC44FE448FA17

Amount of Each Receipt this Period
 25.00

Memo Item

C. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 04 / 06 / 2021
Transaction ID : A6FE9711547464B9698F

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1210 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address **3197 HARVEST MOON DRIVE**

City PALM HARBOR	State FL	Zip Code 34683
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
04 / 10 / 2021

Transaction ID : A4E5D437EAAD7488F8D4

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address **3197 HARVEST MOON DRIVE**

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt
04 / 13 / 2021

Transaction ID : AC7BCCE01D2F7406EB24

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address **3197 HARVEST MOON DRIVE**

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
620.00

Date of Receipt
04 / 24 / 2021

Transaction ID : A55CB2AF6C1B24715BEF

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1211 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 645.00

Date of Receipt
 05 / 04 / 2021
Transaction ID : A43BB049E0BE94F6D8CB

Amount of Each Receipt this Period
 25.00

Memo Item

B. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 680.00

Date of Receipt
 05 / 06 / 2021
Transaction ID : A76A6FE43E3D645AE890

Amount of Each Receipt this Period
 35.00

Memo Item

C. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 715.00

Date of Receipt
 05 / 10 / 2021
Transaction ID : A3E761E617B934909912

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1212 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address **3197 HARVEST MOON DRIVE**

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **740.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2021

Transaction ID : A512E6C17D93B4A9AAEC

Amount of Each Receipt this Period

25.00

 Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address **3197 HARVEST MOON DRIVE**

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A38641DBB99CA4134802

Amount of Each Receipt this Period

35.00

 Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LEWIS, JENNY, , ,

Mailing Address **3197 HARVEST MOON DRIVE**

City PALM HARBOR	State FL	Zip Code 34683
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIS	Occupation (for Individual) PRODUCT MANAGEMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2021

Transaction ID : A060EFE4B998342688F7

Amount of Each Receipt this Period

25.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1213 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 835.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A55652FDE270F4B1C9C3
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A78D970ADC5B64D139D0
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 895.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AE111F007EC842819E8
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 95.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1214 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, JENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3197 HARVEST MOON DRIVE
 City PALM HARBOR State FL Zip Code 34683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIS Occupation (for Individual) PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 930.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A0A7C524802CA4E5BB8F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LEWIS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3376 FLINT HILL PL
 City WOODBRIDGE State VA Zip Code 22192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US ARMY Occupation (for Individual) ACQUISITION PROGRAM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A0DD03C23A9AE45A2949
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LEWIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 VILLAGE ROAD
 City ENGLEWOOD State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTIS WARRANTY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A6E1CC4C97AFD42698D6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1215 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 VILLAGE ROAD
 City ENGLEWOOD State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTIS WARRANTY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A2E1E2B93BB17442AB23
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LEWIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 VILLAGE ROAD
 City ENGLEWOOD State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTIS WARRANTY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A1FE40321401242ED942
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LEWIS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 VILLAGE ROAD
 City ENGLEWOOD State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORTIS WARRANTY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A24D2F2ACCAD041D2BEE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1216 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LIBBY, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 BUENA VISTA
 City BREVARD State NC Zip Code 28712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOOKING GLASS REALTY Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AF9BCBD412B0041F8879
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. LIDSTER, GERNITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2209 W 25TH ST 9
 City SAN PEDRO State CA Zip Code 90735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A68190EC90A51496A8A9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LIEBER, C., A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9413 E LAKEPOINT DR
 City WICHITA State KS Zip Code 67226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) PRESIDENT OF PRIVATE CO.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A06CF94CDDF7B46F7A20
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1217 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LI, HAIYAN, , ,

Mailing Address **12720 BROCKTON LANE**

City OSSEO	State MN	Zip Code 55369
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH MEMORIAL HEALTH	Occupation (for Individual) PHARMACIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A7847784B0E9A457882F

Amount of Each Receipt this Period

50.00

 Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LI, HAIYAN, , ,

Mailing Address **12720 BROCKTON LANE**

City OSSEO	State MN	Zip Code 55369
----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH MEMORIAL HEALTH	Occupation (for Individual) PHARMACIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A518649B6842B4FE5ADF

Amount of Each Receipt this Period

50.00

 Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LILLIBRIDGE, MARILYN, , ,

Mailing Address **11641 HIGHWAY 23**

City WATFORD CITY	State ND	Zip Code 58854
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2021

Transaction ID : A7D4323C88157428FAF4

Amount of Each Receipt this Period

35.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1218 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LIMMER, MEREDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3882 STONE QUARRY RD
 City CAZENOVA State NY Zip Code 13035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A0DED7904B4914E3187B
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. LINAWEAVER, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24583 147TH ST
 City LEAVENWORTH State KS Zip Code 66048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINAWEAVER CONST, INC. Occupation (for Individual) COMPANY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A98610BEA6DF24D1C9E0
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LINAWEAVER, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24583 147TH ST
 City LEAVENWORTH State KS Zip Code 66048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LINAWEAVER CONST, INC. Occupation (for Individual) COMPANY OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AB81163E9365B4CA7BB5
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1219 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LINCOLN, MURIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20251 TUCKER ROAD
 City GREENLEAF State ID Zip Code 83626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A74858A3DD107414F9D9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LINDEN, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 TEAPOT HILL RD
 City WILTON State CT Zip Code 06897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 16 / 2021**
Transaction ID : A7350A50191E2495EB5C
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LINDGREN, JRERTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 E MEADOWLARK LN
 City LAWRENCEVILLE State GA Zip Code 30044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A751FF74D7BEE49B0955
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	320.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1220 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LINDQUIST, LINDA, , ,

Mailing Address 1149 PENINSULA DR.

City GILBERT State AZ Zip Code 85233

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 03 / 2021
Transaction ID : A7DA462A942CB479A968

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LINDQUIST, LINDA, , ,

Mailing Address 1149 PENINSULA DR.

City GILBERT State AZ Zip Code 85233

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
04 / 03 / 2021
Transaction ID : A1A6B66CD5A6643198D9

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LINDQUIST, LINDA, , ,

Mailing Address 1149 PENINSULA DR.

City GILBERT State AZ Zip Code 85233

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 03 / 2021
Transaction ID : AAE8FDE3EB8564A9FA4E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1221 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LINDQUIST, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1149 PENINSULA DR.
 City GILBERT State AZ Zip Code 85233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AD09D3AC5F8D74867B1D
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LINEBERRY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4650 STONE STATION RD
 City PAULINE State SC Zip Code 29374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A68B472FC3F974D8295F
 Amount of Each Receipt this Period
 117.76
 Memo Item

C. LINEBERRY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4650 STONE STATION RD
 City PAULINE State SC Zip Code 29374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 353.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A6B85736646F242DDBB8
 Amount of Each Receipt this Period
 117.76
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1222 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LINEBERRY, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4650 STONE STATION RD

City PAULINE	State SC	Zip Code 29374
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
471.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2021

Transaction ID : A5ED1EE5DB166460C95F

Amount of Each Receipt this Period
117.76

Memo Item

B. LISA, MARY GRACE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 MARINE VIEW PLAZA, APT. 20-B

City HOBOKEN	State NJ	Zip Code 07030
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : AEA734AF60DF841198A7

Amount of Each Receipt this Period
35.00

Memo Item

C. LITTLE, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 916 FAIR ST

City FRANKLIN	State TN	Zip Code 37064
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2021

Transaction ID : ACC4E2500228349799DC

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	202.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1223 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LITTLE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 630 N. STERLING ST

City NAMPA	State ID	Zip Code 83651
---------------	----------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021

Transaction ID : AC91055BBAAEF4550B60

Amount of Each Receipt this Period
50.00

Memo Item

B. LITTLE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 630 N. STERLING ST

City NAMPA	State ID	Zip Code 83651
---------------	----------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021

Transaction ID : A1EA70830139E4619B48

Amount of Each Receipt this Period
50.00

Memo Item

C. LITTLE, GILBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 AVENIDA DR

City HAUGHTON	State ID LA	Zip Code 71037-8402
------------------	----------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021

Transaction ID : A824D7B215876466993E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1224 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, GILBERT, , ,

Mailing Address **405 AVENIDA DR**

City HAUGHTON	State LA	Zip Code 71037-8402
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2021

Transaction ID : A4516588225C64843BD0

Amount of Each Receipt this Period

100.00

 Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, GILBERT, , ,

Mailing Address **405 AVENIDA DR**

City HAUGHTON	State LA	Zip Code 71037-8402
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2021

Transaction ID : A1B2522E476664CDEA2E

Amount of Each Receipt this Period

100.00

 Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, GILBERT, , ,

Mailing Address **405 AVENIDA DR**

City HAUGHTON	State LA	Zip Code 71037-8402
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2021

Transaction ID : A4258F9CE294C450399A

Amount of Each Receipt this Period

100.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1225 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LITTLE, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2021

Transaction ID : A366A7BC7A6F045A0B4C

Amount of Each Receipt this Period
20.20

Memo Item

B. LITTLE, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2021

Transaction ID : A5CC1BBC1D180424ABFC

Amount of Each Receipt this Period
25.00

Memo Item

C. LITTLE, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A5C71BF48F24B4AD7AAC

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1226 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LITTLE, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A2945E9756D0F4DD4839

Amount of Each Receipt this Period
20.20

Memo Item

B. LITTLE, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2021
Transaction ID : A391A3EC10F0348F4883

Amount of Each Receipt this Period
25.00

Memo Item

C. LITTLE, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A61481FE0BABA43E6BD2

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1227 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, PAMELA, , ,

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE State NC Zip Code 28227

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
376.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2021

Transaction ID : A6B95E326F68A4F11A8E

Amount of Each Receipt this Period
20.20

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, PAMELA, , ,

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE State NC Zip Code 28227

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 25 / 2021

Transaction ID : A56DFADC629EC4706ACB

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LITTLE, PAMELA, , ,

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE State NC Zip Code 28227

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
436.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 17 / 2021

Transaction ID : A5F044C9AFEE44B4E839

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.20

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1228 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LITTLE, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
456.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2021

Transaction ID : A7E23EEDE755A4EE4AF7

Amount of Each Receipt this Period
20.20

Memo Item

B. LITTLE, PAMELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1117 MANCHESTER LANE

City CHARLOTTE	State NC	Zip Code 28227
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
481.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2021

Transaction ID : A6CB6B552273F4ECCA20

Amount of Each Receipt this Period
25.00

Memo Item

C. LIU, ILING, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5252 WEYMOUTH WAY

City OCEANSIDE	State CA	Zip Code 92057
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2021

Transaction ID : A16BF93390D624FA4A3D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1229 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LIU, ILING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5252 WEYMOUTH WAY
 City OCEANSIDE State CA Zip Code 92057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 28 / 2021**
Transaction ID : AFD489236870640C7A41
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LIU, SHAOJUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CALIFORNIA ST
 City HICKSVILLE State NY Zip Code 11801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CMD25 APPAREL INV Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : A8E0262B5F6F94F22B08
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LIU, SHAOJUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 CALIFORNIA ST
 City HICKSVILLE State NY Zip Code 11801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CMD25 APPAREL INV Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : ABD73BD1A390B438CBCC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1230 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LJUNGDAHL, LARS, , ,

Mailing Address 20 LITTLE COMFORT ROAD

City SAVANNAH	State GA	Zip Code 31411
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A025B68C76EF64B0A83F

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLAMA, MARILYN, , ,

Mailing Address 11841 SW 103 LANE

City MIAMI	State FL	Zip Code 33186
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A392E1DED8F0643BD83B

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLAMA, MARILYN, , ,

Mailing Address 11841 SW 103 LANE

City MIAMI	State FL	Zip Code 33186
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : AFDA5EC9544C4CFD974

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1231 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LLAMA, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11841 SW 103 LANE
 City MIAMI State FL Zip Code 33186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A5BA5EA2A24A14B9BB5C
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. LLAMA, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11841 SW 103 LANE
 City MIAMI State FL Zip Code 33186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A6F14F2871095420DA24
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. LLOREN, SARAH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 E 2ND ST
 City FOND DU LAC State WI Zip Code 54935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : AA470081DE9B746EEA77
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1232 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LLOREN, SARAH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 E 2ND ST
 City FOND DU LAC State WI Zip Code 54935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A1CD6DC83A0434D6CB35
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LLOYD, CINDY, S, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15885 ROUTE 6
 City SMETHPORT State PA Zip Code 16749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A3837747A8C254999BAF
 Amount of Each Receipt this Period 200.00
 Memo Item

C. LLOYD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1287 N 550 W
 City BRIGHAM CITY State UT Zip Code 84302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TYSON FOODS Occupation (for Individual) FOOD SAFETY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A8D41B81D732F4DBD982
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1233 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, WILLIAM, , ,

Mailing Address 1287 N 550 W

City BRIGHAM CITY	State UT	Zip Code 84302
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TYSON FOODS	Occupation (for Individual) FOOD SAFETY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A6104C86995C84AC09C1

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, WILLIAM, , ,

Mailing Address 1287 N 550 W

City BRIGHAM CITY	State UT	Zip Code 84302
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TYSON FOODS	Occupation (for Individual) FOOD SAFETY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2021

Transaction ID : AA72DDDFE89AD40F49F2

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LLOYD, WILLIAM, , ,

Mailing Address 1287 N 550 W

City BRIGHAM CITY	State UT	Zip Code 84302
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TYSON FOODS	Occupation (for Individual) FOOD SAFETY
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2021

Transaction ID : AEA7F8BEF38CA41E1A3B

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1234 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LLOYD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1287 N 550 W

City BRIGHAM CITY	State UT	Zip Code 84302
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TYSON FOODS	Occupation (for Individual) FOOD SAFETY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021

Transaction ID : AEC2194E1F59D4674AC1

Amount of Each Receipt this Period
50.00

Memo Item

B. LLOYD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1287 N 550 W

City BRIGHAM CITY	State UT	Zip Code 84302
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TYSON FOODS	Occupation (for Individual) FOOD SAFETY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021

Transaction ID : AB9B5E21A27754AD2AC2

Amount of Each Receipt this Period
25.00

Memo Item

C. LOBITZ, BRICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 GABRIELLE LANE

City DESTREHAN	State LA	Zip Code 70047
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRO REMODELING	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021

Transaction ID : AFFD4322E56744CC497F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1235 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOBITZ, BRICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 GABRIELLE LANE
 City DESTREHAN State LA Zip Code 70047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRO REMODELING Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : ABB846E95C9EC42D8B2F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LOCKWOOD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2156
 City GLOUCESTER State VA Zip Code 23061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKWOOD CARPETS Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : AF8A4617B444946BABC4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LOCKWOOD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2156
 City GLOUCESTER State VA Zip Code 23061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKWOOD CARPETS Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AFA92573A5A4540149FF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1236 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONGAKER, DWIGHT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 LONGLEAF PLACE
 City MINDEN State NV Zip Code 89423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 21 / 2021
Transaction ID : A792D249DD0564542A81
 Amount of Each Receipt this Period 500.00
 Memo Item

B. LONGAKER, DWIGHT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 LONGLEAF PLACE
 City MINDEN State NV Zip Code 89423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 02 / 26 / 2021
Transaction ID : A938BB328EC884B2EB4B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LONG, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 267
 City BERNARDSVILLE State NJ Zip Code 07924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARJAC INC Occupation (for Individual) TRAVEL MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2021
Transaction ID : A98A5AABDD1394282A90
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1237 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONG, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 267
 City BERNARDSVILLE State NJ Zip Code 07924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARJAC INC Occupation (for Individual) TRAVEL MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 12 / 2021
Transaction ID : AE2D94D009EA14D4A97F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LONG, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 267
 City BERNARDSVILLE State NJ Zip Code 07924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARJAC INC Occupation (for Individual) TRAVEL MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2021
Transaction ID : A69BE5841A7054F59B58
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LONG, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 267
 City BERNARDSVILLE State NJ Zip Code 07924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARJAC INC Occupation (for Individual) TRAVEL MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 12 / 2021
Transaction ID : AB6F5CC4D9AAB4A498BE
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1238 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONG, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 HUBER LN
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AB4108499A9B14439A5D
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 06 / 2021
Transaction ID : ACBA4C87A262440378A6
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2021
Transaction ID : A2290F3D157A844FB92F
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1035.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1239 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759

City WILLCOX	State AZ	Zip Code 85644
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) LONGMIRE WELL SERVICE		Occupation (for Individual) SELF EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 01 / 24 / 2021
Transaction ID : A5515BE91BC7A49D3A9D

Amount of Each Receipt this Period
 100.00

Memo Item

B. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759

City WILLCOX	State AZ	Zip Code 85644
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) LONGMIRE WELL SERVICE		Occupation (for Individual) SELF EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 02 / 06 / 2021
Transaction ID : AEA84471747114E95969

Amount of Each Receipt this Period
 500.00

Memo Item

C. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759

City WILLCOX	State AZ	Zip Code 85644
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) LONGMIRE WELL SERVICE		Occupation (for Individual) SELF EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 02 / 19 / 2021
Transaction ID : AD4308A7D45C2473795C

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1240 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LONGMIRE, MICHAEL, , ,

Mailing Address **P O BOX 759**

City WILLCOX	State AZ	Zip Code 85644
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LONGMIRE WELL SERVICE	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2200.00

Date of Receipt
02 / 24 / 2021

Transaction ID : A4BA625B7E3E94A64AC8

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LONGMIRE, MICHAEL, , ,

Mailing Address **P O BOX 759**

City WILLCOX	State AZ	Zip Code 85644
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LONGMIRE WELL SERVICE	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt
03 / 06 / 2021

Transaction ID : AD685587E3C7F43D1BA1

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LONGMIRE, MICHAEL, , ,

Mailing Address **P O BOX 759**

City WILLCOX	State AZ	Zip Code 85644
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LONGMIRE WELL SERVICE	Occupation (for Individual) SELF EMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3200.00

Date of Receipt
03 / 19 / 2021

Transaction ID : A7B30B9A3818243FD96F

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1241 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759

City WILLCOX	State AZ	Zip Code 85644
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LONGMIRE WELL SERVICE	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021

Transaction ID : A0968EFB0FB2744CE9FD

Amount of Each Receipt this Period
100.00

Memo Item

B. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759

City WILLCOX	State AZ	Zip Code 85644
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LONGMIRE WELL SERVICE	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2021

Transaction ID : A177FD025A89A4FF5B7F

Amount of Each Receipt this Period
500.00

Memo Item

C. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759

City WILLCOX	State AZ	Zip Code 85644
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LONGMIRE WELL SERVICE	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021

Transaction ID : A71201A0A645B48DB932

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1242 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4400.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : A1C9665E19A9C45DFA17
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4900.00

Date of Receipt **05 / 06 / 2021**
Transaction ID : AA67C47A577FB404CBDD
 Amount of Each Receipt this Period 500.00
 Memo Item

C. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt **05 / 19 / 2021**
Transaction ID : AC46BF4B5E911452D8A2
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1243 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5500.00

Date of Receipt **05 / 24 / 2021**
Transaction ID : A37E6AF0418EB490D9AE
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt **06 / 06 / 2021**
Transaction ID : A7467EE8366D44822AAC
 Amount of Each Receipt this Period 500.00
 Memo Item

C. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759
 City WILLCOX State AZ Zip Code 85644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGMIRE WELL SERVICE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt **06 / 19 / 2021**
Transaction ID : A4C05D14C31424A01959
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1244 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONGMIRE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 759

City WILLCOX	State AZ	Zip Code 85644
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) LONGMIRE WELL SERVICE		Occupation (for Individual) SELF EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 6600.00

Date of Receipt
 06 / 24 / 2021
Transaction ID : A6EA7502C42D94DB3B67

Amount of Each Receipt this Period
 100.00

Memo Item

B. LONZO, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11585 ARGUELLO DRIVE

City MIRA LOMA	State CA	Zip Code 91752
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) THE JUDGE GROUP		Occupation (for Individual) RN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 03 / 2021
Transaction ID : ABF0DB082E35343A38D0

Amount of Each Receipt this Period
 35.00

Memo Item

C. LOOS, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 S. BALSAM STREET

City DENVER	State CO	Zip Code 80232
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 06 / 27 / 2021
Transaction ID : A33AB0CDBA1434084B46

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1245 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOOS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4915 CLUB COURT

City QUINCY	State IL	Zip Code 62305
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FRAC SAND
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A8639392C64B04690ACA

Amount of Each Receipt this Period
50.00

Memo Item

B. LOOS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4915 CLUB COURT

City QUINCY	State IL	Zip Code 62305
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FRAC SAND
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : A90F5EA586CB2486085F

Amount of Each Receipt this Period
35.00

Memo Item

C. LOOS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4915 CLUB COURT

City QUINCY	State IL	Zip Code 62305
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FRAC SAND
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A6F942D0446D349CD8EC

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1246 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOOS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4915 CLUB COURT
 City QUINCY State IL Zip Code 62305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FRAC SAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : AFC06968987454165A9D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LOOS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4915 CLUB COURT
 City QUINCY State IL Zip Code 62305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FRAC SAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A426711CC9BDE4BD2BF1
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LOOS, ORVILLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4915 CLUB COURT
 City QUINCY State IL Zip Code 62305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FRAC SAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : ABE6903E1AB2148DFAE4
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1247 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LOOS, ORVILLE, , ,

Mailing Address 4915 CLUB COURT

City QUINCY	State IL	Zip Code 62305
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FRAC SAND
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2021

Transaction ID : A31521F63F458488BBD5

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LO, POLLYANNA, , ,

Mailing Address 13619 CEDAR CREEK COURT

City LA MIRADA	State CA	Zip Code 90638
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2021

Transaction ID : A2F6630855ECB4A4DA3E

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LORENTZEN, EDWARD, , ,

Mailing Address 1504 RIMSTONE DR.

City CEDAR PARK	State TX	Zip Code 78613
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : A88DAEABEC0BD46D787A

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1248 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LORENTZEN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1504 RIMSTONE DR.
 City CEDAR PARK State TX Zip Code 78613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AECFBDBC4451D4407910
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LOTT, CLARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2380 FM 3459
 City ONALASKA State TX Zip Code 77360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OXY Occupation (for Individual) DIRECTIONAL DRILLING FIELD SUPE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 27 / 2021
Transaction ID : A59280B728CD349B4A5B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LOTT, CLARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2380 FM 3459
 City ONALASKA State TX Zip Code 77360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OXY Occupation (for Individual) DIRECTIONAL DRILLING FIELD SUPE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A49C6D5B7B861421F8F6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1249 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOTTERMOSER, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WEST 5TH STREET
 City ONEIDA State NY Zip Code 13421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AE9A4975B5677415696C
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. LOTTERMOSER, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 WEST 5TH STREET
 City ONEIDA State NY Zip Code 13421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AEAAACC3697F7401A8BD
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. LOUGHMAN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3055 VILLAGE RD
 City ORWIGSBURG State PA Zip Code 17961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A69C5E23259A044F788A
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1250 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOUGHMAN, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3055 VILLAGE RD
 City ORWIGSBURG State PA Zip Code 17961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AC4075029FA654F339AD
 Amount of Each Receipt this Period 25.00
 Memo Item

B. LOUIS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 VN. WREN AVE
 City PALATINE State IL Zip Code 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : A56B88E0799F24FAC84C
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A7A3B62889372473A8EE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1251 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A29FDF24C554A468806
 Amount of Each Receipt this Period 15.00
 Memo Item

B. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 03 / 2021
Transaction ID : A4C0927D5706A4A93AA9
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 28 / 2021
Transaction ID : AD06760BA2B1C4869A18
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1252 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **03 / 30 / 2021**
Transaction ID : AE2D4A92B398F44B38C8
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : A82CF03F4342E4319846
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : AC35B9C549E8147EFB3B
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1253 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A324654138AEA400CBB2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A299CB1179D4D4CC49C2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : A5AD5BD7357D1467BB80
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1254 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A7E3E57D4EC424A739AF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A98BFFD3BE3F745708FE
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A60771ED33F384B2BB0D
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1255 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOUKS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 WALNUT AVE S
 City OWATONNA State MN Zip Code 55060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C L COMMUNICATIONS Occupation (for Individual) MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A86404E7EA5FD47BABAE
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LOVE, CHRISTINE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21503 MAC ARTHUR BLVD
 City WARREN State MI Zip Code 48089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AFE94D35BF40D46E1A07
 Amount of Each Receipt this Period 35.00
 Memo Item

C. LOW, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2785 HELENA FLATS RD
 City KALISPELL State MT Zip Code 59901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONCRETE GRINDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2021
Transaction ID : AC66D60F8C4D54B9099B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1256 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOW, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2785 HELENA FLATS RD
 City KALISPELL State MT Zip Code 59901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONCRETE GRINDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A3ADF16F3877842BB973
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LOW, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2785 HELENA FLATS RD
 City KALISPELL State MT Zip Code 59901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONCRETE GRINDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A362C78A2C3714108AE7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LOW, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2785 HELENA FLATS RD
 City KALISPELL State MT Zip Code 59901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONCRETE GRINDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AEE234A5D273F4FCD828
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1257 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOWRIE, EDMUND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 511 SHORE ROAD
 City CAPE NEDDICK State ME Zip Code 03902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2021
Transaction ID : A9831C125B33D4EE1886
 Amount of Each Receipt this Period 250.00
 Memo Item

B. LOWRIE, EDMUND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 511 SHORE ROAD
 City CAPE NEDDICK State ME Zip Code 03902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 03 / 2021
Transaction ID : A1AA4E794D98A40D1B2D
 Amount of Each Receipt this Period 75.00
 Memo Item

C. LUCAS, WILLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 W LEAGUE CITY PKWY
 City LEAGUE CITY State TX Zip Code 77573-5462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUCAS CONSTRUCTION Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A80D23C18AEB14EBF87E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1258 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUCAS, WILLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 W LEAGUE CITY PKWY
 C
 City LEAGUE CITY State TX Zip Code 77573-5462
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) LUCAS CONSTRUCTION Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : AA0AC2186C8164234B74
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. LUCAS, WILLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 W LEAGUE CITY PKWY
 C
 City LEAGUE CITY State TX Zip Code 77573-5462
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) LUCAS CONSTRUCTION Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A0034A0AFF3934D3F9DF
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LUCAS, WILLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 551 W LEAGUE CITY PKWY
 C
 City LEAGUE CITY State TX Zip Code 77573-5462
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) LUCAS CONSTRUCTION Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : ACDA10D1A905F435FB22
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1259 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUCAS, WILLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 551 W LEAGUE CITY PKWY
C

City LEAGUE CITY	State TX	Zip Code 77573-5462
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUCAS CONSTRUCTION	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : A46D303F2D4BE4D89A76

Amount of Each Receipt this Period
50.00

Memo Item

B. LUCAS, WILLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 551 W LEAGUE CITY PKWY
C

City LEAGUE CITY	State TX	Zip Code 77573-5462
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUCAS CONSTRUCTION	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2021

Transaction ID : A4A514F899DB24BE48B7

Amount of Each Receipt this Period
25.00

Memo Item

C. LUCAS, WILLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 551 W LEAGUE CITY PKWY
C

City LEAGUE CITY	State TX	Zip Code 77573-5462
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LUCAS CONSTRUCTION	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : ADFBE2B8778604C428BE

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1260 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUDDER, NARINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7453 DEL CIELO WAY
 City MODESTO State CA Zip Code 95356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMZ REAL ESTATE Occupation (for Individual) REAL ESTATE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : AA10F6A7D4C89447D8AB
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LUDDER, NARINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7453 DEL CIELO WAY
 City MODESTO State CA Zip Code 95356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PMZ REAL ESTATE Occupation (for Individual) REAL ESTATE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A7A719C4F44014549BE9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LUDINGTON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19329 WATERMARK DR UNIT 362 BUILDING 300
 City CORNELIUS State NC Zip Code 28031-4107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A23FB0FD27619470FB81
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1261 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUDINGTON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19329 WATERMARK DR UNIT 362
 BUILDING 300

City CORNELIUS State NC Zip Code 28031-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 29 / 2021
Transaction ID : A8660F614964241D38BC

Amount of Each Receipt this Period
 50.00

Memo Item

B. LUEKEN, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 512 EAST MONROE

City SAINT LOUIS State MO Zip Code 63122-6318

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GMSI Occupation (for Individual) PRES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 24 / 2021
Transaction ID : A981791A88EC64500AE5

Amount of Each Receipt this Period
 100.00

Memo Item

C. LUEKEN, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 512 EAST MONROE

City SAINT LOUIS State MO Zip Code 63122-6318

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GMSI Occupation (for Individual) PRES

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 24 / 2021
Transaction ID : AD9FE8FEF4FBC4D0E847

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1262 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUEKEN, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 512 EAST MONROE

City SAINT LOUIS	State MO	Zip Code 63122-6318
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GMSI	Occupation (for Individual) PRES
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A26630690E7454F72A5B

Amount of Each Receipt this Period
100.00

Memo Item

B. LUEKEN, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 512 EAST MONROE

City SAINT LOUIS	State MO	Zip Code 63122-6318
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GMSI	Occupation (for Individual) PRES
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2021

Transaction ID : A7FB5080E0FD34C53A6C

Amount of Each Receipt this Period
100.00

Memo Item

C. LUKASIK, CYNTHIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12910 RED OAK GLEN DR

City CYPRESS	State TX	Zip Code 77429
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A166963FE532B4A3C9B1

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1263 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUNDQUIST, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 LUND RD
 City COOK State MN Zip Code 55723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A93EB32FBF56A40E5B62
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. LUO, XIAOBING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1803 DALTON DR
 City MILPITAS State CA Zip Code 95035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KOHLS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A647FC5E8210E42569EE
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. LUPER, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5902 JEFFERSON DAVIS HWY
 City WOODFORD State VA Zip Code 22580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : AEE0EBBBC911842C5B7D
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1264 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUPER, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5902 JEFFERSON DAVIS HWY

City WOODFORD	State VA	Zip Code 22580
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2021

Transaction ID : AFBA5773FEAD24189883

Amount of Each Receipt this Period
50.00

Memo Item

B. LUSCHENAT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7030 BELLEVUE FARM RD

City WARRENTON	State VA	Zip Code 20186
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : AFCABE4D37AAC4960892

Amount of Each Receipt this Period
35.00

Memo Item

C. LUTZKE, DENISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 FORTUNE CREEK LANE

City CLE ELUM	State WA	Zip Code 98922
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2021

Transaction ID : A9BB97F65BA244C9B9F5

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1265 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUTZKE, DENISE, , ,

Mailing Address **250 FORTUNE CREEK LANE**

City CLE ELUM	State WA	Zip Code 98922
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 16 / 2021

Transaction ID : AF3F2836985F94121A35

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUTZKE, DENISE, , ,

Mailing Address **250 FORTUNE CREEK LANE**

City CLE ELUM	State WA	Zip Code 98922
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
03 / 20 / 2021

Transaction ID : A139DF1E23B2D4683AA5

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUTZKE, DENISE, , ,

Mailing Address **250 FORTUNE CREEK LANE**

City CLE ELUM	State WA	Zip Code 98922
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 16 / 2021

Transaction ID : A1C8229DF51FC4E09A8A

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1266 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUTZKE, DENISE, , ,

Mailing Address **250 FORTUNE CREEK LANE**

City CLE ELUM	State WA	Zip Code 98922
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
04 / 20 / 2021

Transaction ID : AC49130CDD92843CD89A

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUTZKE, DENISE, , ,

Mailing Address **250 FORTUNE CREEK LANE**

City CLE ELUM	State WA	Zip Code 98922
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
05 / 16 / 2021

Transaction ID : AEBDD568225A54BA09DC

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUTZKE, DENISE, , ,

Mailing Address **250 FORTUNE CREEK LANE**

City CLE ELUM	State WA	Zip Code 98922
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt
05 / 20 / 2021

Transaction ID : A492635D524CB42468E8

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1267 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUTZKE, DENISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 FORTUNE CREEK LANE

City CLE ELUM	State WA	Zip Code 98922
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2021

Transaction ID : A10B6167EEA8B442EA66

Amount of Each Receipt this Period
50.00

Memo Item

B. LUTZKE, DENISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 FORTUNE CREEK LANE

City CLE ELUM	State WA	Zip Code 98922
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE MOODSTERS CHILDREN'S FOUNDATION	Occupation (for Individual) PEDIATRIC NURSE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2021

Transaction ID : A950E5D85E8914F9E84B

Amount of Each Receipt this Period
100.00

Memo Item

C. LYMAN, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2673 CABALLO CT

City LAS CRUCES	State NM	Zip Code 88011
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2021

Transaction ID : AE94C363CA67943EABBB

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1268 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LYNN, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 MERMAID DRIVE
 City MANAHAWKIN State NJ Zip Code 08050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AEFDC EE3BA6994D31B94
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LYTLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3636 GIDDINGS RANCH ROAD
 City ALTADENA State CA Zip Code 91001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A596E290F670E41D58D2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LYTLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3636 GIDDINGS RANCH ROAD
 City ALTADENA State CA Zip Code 91001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A7799E74618524968B7E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1269 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LYUBKIN, ALEXANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18671 COLLINS AVENUE
2904

City NORTH MIAMI BEACH State FL Zip Code 33160

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021

Transaction ID : A4E6725FC021B4458A66

Amount of Each Receipt this Period
50.00

Memo Item

B. LYUBKIN, ALEXANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18671 COLLINS AVENUE
2904

City NORTH MIAMI BEACH State FL Zip Code 33160

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021

Transaction ID : A5189718E3C2841BFA87

Amount of Each Receipt this Period
50.00

Memo Item

C. MACALISTER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 814 BEECH ROAD

City FEASTERVILLE TREVOSSE State PA Zip Code 19053

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021

Transaction ID : A14AC0D84CD424F399D3

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1270 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACALISTER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 814 BEECH ROAD
 City FEASTERVILLE TREVOSSE State PA Zip Code 19053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A6E0C0B6C2CBE4A9C973
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MACDOUGALL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1772 25TH WALK NE
 City ISSAQUAH State WA Zip Code 98029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 04 / 17 / 2021
Transaction ID : AAE6D05F2054949C0878
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MACDOUGALL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1772 25TH WALK NE
 City ISSAQUAH State WA Zip Code 98029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 26 / 2021
Transaction ID : A89173FF8623F467EB1E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1271 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACDOUGALL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1772 25TH WALK NE
 City ISSAQUAH State WA Zip Code 98029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A4F6C877258CB4996A78
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MACDOUGALL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1772 25TH WALK NE
 City ISSAQUAH State WA Zip Code 98029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A17DF0F579F7E4462AE5
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MACDOUGALL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1772 25TH WALK NE
 City ISSAQUAH State WA Zip Code 98029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : ADC8286184CD549919BC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 95.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1272 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACDOUGALL, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1772 25TH WALK NE
 City ISSAQUAH State WA Zip Code 98029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AE45FDE2AB3C44B7B9A8
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MACGREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7009 KENLEIGH ROAD
 City BALTIMORE State MD Zip Code 21212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A9527CBC491494621970
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MACGREGOR, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7009 KENLEIGH ROAD
 City BALTIMORE State MD Zip Code 21212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A3FE174DAE49846CDAAS
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1273 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACKLIN, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5602 FEAGAN ST UNIT E

City HOUSTON	State TX	Zip Code 77007
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2021

Transaction ID : AD19F25A176494792B8A

Amount of Each Receipt this Period
25.00

Memo Item

B. MACKLIN, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5602 FEAGAN ST UNIT E

City HOUSTON	State TX	Zip Code 77007
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2021

Transaction ID : A01A5C557D1774EB793A

Amount of Each Receipt this Period
10.00

Memo Item

C. MACKLIN, SALLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5602 FEAGAN ST UNIT E

City HOUSTON	State TX	Zip Code 77007
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : A665BD090F6484DC3835

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1274 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACKLIN, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5602 FEAGAN ST UNIT E
 City HOUSTON State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A4C8DC17FA7B54043805
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MACKLIN, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5602 FEAGAN ST UNIT E
 City HOUSTON State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 05 / 18 / 2021
Transaction ID : AA830BAAB18CF4B53AE0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MACKLIN, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5602 FEAGAN ST UNIT E
 City HOUSTON State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A19F11C399B374CC49EF
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1275 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACKLIN, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5602 FEAGAN ST UNIT E
 City HOUSTON State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AD3BD6D23ED024C26A16
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MACKLIN, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5602 FEAGAN ST UNIT E
 City HOUSTON State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 20 / 2021
Transaction ID : ABC2B73C8C43D494EA29
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MACY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 JUMPER CT
 City FOLSOM State CA Zip Code 95630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUN OWNERS OF AMERICA Occupation (for Individual) CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A1CD401AB4EFD4A8D84D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1276 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 JUMPER CT
 City FOLSOM State CA Zip Code 95630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUN OWNERS OF AMERICA Occupation (for Individual) CHAIRMAN OF THE BOARD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 08 / 2021**
Transaction ID : A78B52356EB9C45ADB04
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MADIEDO, REYNALDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 ALHAMBRA CIRCLE
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : A2B24C90CACE34720AC9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MAGEE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 289
 City COLRAIN State MA Zip Code 01340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **01 / 31 / 2021**
Transaction ID : A9911EF19160046A3B42
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1277 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAGIDOW, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 PONTE VEDRA BLVD
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : ACE42AB72B31F4571B71
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MAGIDOW, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 PONTE VEDRA BLVD
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AD04F1C6862C140909D4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MAHONEY, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 SOUTHERN HILL DRIVE
 City DULUTH State GA Zip Code 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A7DF8ABA8F67E47A3908
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1278 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MALEK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 THOMAS TAYLOR LN
 City HUGHSON State CA Zip Code 95326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021
Transaction ID : ACC09869BB739488AAAB
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. MALEK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 THOMAS TAYLOR LN
 City HUGHSON State CA Zip Code 95326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : AC6324D6F685742D1A38
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. MALEK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 THOMAS TAYLOR LN
 City HUGHSON State CA Zip Code 95326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : AA82749C7EE7848BA81B
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1279 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MALEK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 THOMAS TAYLOR LN
 City HUGHSON State CA Zip Code 95326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **06 / 16 / 2021**
Transaction ID : A32811C3694B9470F886
 Amount of Each Receipt this Period 75.00
 Memo Item

B. MALEY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11834 RED COAT LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K O SUPPLY LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : A4585776722064B09864
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MALEY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11834 RED COAT LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K O SUPPLY LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : A4B130D5617084247B08
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1280 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MALEY, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11834 RED COAT LN

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) K O SUPPLY LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2021

Transaction ID : A3FA6FBA0FFF74981865

Amount of Each Receipt this Period
35.00

Memo Item

B. MALEY, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11834 RED COAT LN

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) K O SUPPLY LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : A0AFE0B9CB4D04521AC3

Amount of Each Receipt this Period
35.00

Memo Item

C. MALEY, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11834 RED COAT LN

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) K O SUPPLY LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2021

Transaction ID : A2DBF21D67338442ABF7

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1281 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MALEY, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11834 RED COAT LN

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) K O SUPPLY LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : AFC EE48BCA6F44A12A8C

Amount of Each Receipt this Period
35.00

Memo Item

B. MALEY, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11834 RED COAT LN

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) K O SUPPLY LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : A796BEA2B5ECB417AA28

Amount of Each Receipt this Period
35.00

Memo Item

C. MALLOY, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 ALDRICH PL

City BUFFALO	State NY	Zip Code 14220
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	03	/	2021

Transaction ID : A7702255F46DC40CC8AA

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	570.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1282 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MALONE, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 215

City SAUTEE NACOOCHEE	State GA	Zip Code 30571
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2021

Transaction ID : AFA4995ECE3A8475EB3E

Amount of Each Receipt this Period
100.00

Memo Item

B. MALONE, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 215

City SAUTEE NACOOCHEE	State GA	Zip Code 30571
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2021

Transaction ID : ACA85889949C4403C81A

Amount of Each Receipt this Period
100.00

Memo Item

C. MALONE, KATHY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 215

City SAUTEE NACOOCHEE	State GA	Zip Code 30571
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2021

Transaction ID : A8B289815EAF41C1B73

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1283 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MALONE, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 215
 City SAUTEE NACOOCHEE State GA Zip Code 30571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AE94EADE390CB4ABB897
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MANCEBO, EVA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 MAJORCA AVE. 403
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A6DF5512063DF4055A2C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MANCHEV, NICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2602 BELLIS
 City VALENCIA State CA Zip Code 91355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A4423D6B948C54A038E6
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1284 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANDRELL, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7504 SHELDON PARK DR
 City NOLENSVILLE State TN Zip Code 37135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMEPOLYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **02 / 10 / 2021**
Transaction ID : AE8BEEA03778144F7AE3
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MANDRELL, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7504 SHELDON PARK DR
 City NOLENSVILLE State TN Zip Code 37135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMEPOLYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **03 / 10 / 2021**
Transaction ID : A2247E72686E2483FA9E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MANDRELL, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7504 SHELDON PARK DR
 City NOLENSVILLE State TN Zip Code 37135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMEPOLYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : A82421E9836E74CBAB3C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1285 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANDRELL, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7504 SHELDON PARK DR
 City NOLENSVILLE State TN Zip Code 37135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMEPOLYED Occupation (for Individual) BUSINESS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 05 / 10 / 2021
Transaction ID : A7BA090E9CC894A5FB1B
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MANLEY, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 519 WILLOW POINTE SR
 City DALLAS State GA Zip Code 30157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : AC0B681B2378E4195B06
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. MANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 LAZY RIVER LN
 City ATLANTA State GA Zip Code 30350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 03 / 31 / 2021
Transaction ID : A2F93D429129B43B3978
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1286 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1680 LAZY RIVER LN

City ATLANTA	State GA	Zip Code 30350
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2021

Transaction ID : A6E5D2AC5DF34424989A

Amount of Each Receipt this Period
25.00

Memo Item

B. MANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1680 LAZY RIVER LN

City ATLANTA	State GA	Zip Code 30350
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : A73F4AAFE83D34F1FA63

Amount of Each Receipt this Period
25.00

Memo Item

C. MANN, LESTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 129 LANCASTER

City BLYTHEVILLE	State AR	Zip Code 72315
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NUCOR CORPORATION	Occupation (for Individual) STEEL WORKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2021

Transaction ID : A6D2DCEC8B11D44E9A50

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1287 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANN, LESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 LANCASTER
 City BLYTHEVILLE State AR Zip Code 72315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NUCOR CORPORATION Occupation (for Individual) STEEL WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : AD3840D754B1C4C5B856
 Amount of Each Receipt this Period 75.00
 Memo Item

B. MANN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1595 WEST JORDAN RANCH RD
 City KINGMAN State AZ Zip Code 86409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **02 / 24 / 2021**
Transaction ID : A322DBE905B69495EAD6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MANN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1595 WEST JORDAN RANCH RD
 City KINGMAN State AZ Zip Code 86409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt **03 / 24 / 2021**
Transaction ID : A5659683AADD742B68D5
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1288 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANN, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1595 WEST JORDAN RANCH RD
 City KINGMAN State AZ Zip Code 86409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A2871C24C8D904D8BB6F
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MANN, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8061 CLYMER LN
 City INDIANAPOLIS State IN Zip Code 46250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : AFD94B09B94534930812
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MANN, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8061 CLYMER LN
 City INDIANAPOLIS State IN Zip Code 46250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : A134CABECDFD043C0806
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1289 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANN, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8061 CLYMER LN
 City INDIANAPOLIS State IN Zip Code 46250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : A91817CE2182D4A978E8
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MANN, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8061 CLYMER LN
 City INDIANAPOLIS State IN Zip Code 46250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : AF43A07F94AA74617A9E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MANSELL, PATRICIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 MILL ST
 City SPRINGDALE State AR Zip Code 72764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : AA0E79FE315C346EF9FE
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1290 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANSELL, PATRICIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 MILL ST
 City SPRINGDALE State AR Zip Code 72764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **04 / 20 / 2021**
Transaction ID : A5EB1FFAE00384CDC917
 Amount of Each Receipt this Period **200.00**
 Memo Item

B. MANSELL, PATRICIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 MILL ST
 City SPRINGDALE State AR Zip Code 72764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **05 / 18 / 2021**
Transaction ID : A2BB8170A73D8428597A
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. MANSELL, PATRICIA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 MILL ST
 City SPRINGDALE State AR Zip Code 72764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **06 / 18 / 2021**
Transaction ID : AF04B80E0C2554297A5A
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1291 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANUEL, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 979
 City ROSHARON State TX Zip Code 77583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOOD ESSENCE Occupation (for Individual) WOOD WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A2ABD71F8C28948EF87F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MANUEL, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 979
 City ROSHARON State TX Zip Code 77583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOOD ESSENCE Occupation (for Individual) WOOD WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A24441AB049404F3BBEF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MARAGOUSIS, DEMETRIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5916 CHATSWORTH LN
 City BETHESDA State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A5787F9E524A64A19B9D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1292 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARAGOUSIS, DEMETRIOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5916 CHATSWORTH LN
 City BETHESDA State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A8328FE11E9CB43AE85F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARCKS, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 MANOR RIDGE ROAD
 City PELHAM State NY Zip Code 10803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE DENALI GROUP LLC Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A495CB286B65F4BC9B16
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MARCOZZI, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 FORRESTAL DRIVE
 City BEAR State DE Zip Code 19701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REMLINE CORP Occupation (for Individual) CREATIVE DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A7A36AF3A897D428596C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1293 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARLOW, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 WOODCANOE COURT
 City PEACHTREE CITY State GA Zip Code 30269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 MARLOW & ASSOCIATES HEALTHCARE ADVISOR PHYSICAL THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 18 / 2021
Transaction ID : A92713092ADD74DC6B73
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MAROZZI, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 AUGUSTA POINTE
 City PALM BEACH GARDENS State FL Zip Code 33418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 03 / 31 / 2021
Transaction ID : ABFCB69C47ABF44E095C
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MAROZZI, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 AUGUSTA POINTE
 City PALM BEACH GARDENS State FL Zip Code 33418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 04 / 30 / 2021
Transaction ID : AE3D8B3B0D8AF492E9B6
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1294 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAROZZI, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 AUGUSTA POINTE
 City PALM BEACH GARDENS State FL Zip Code 33418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A92E295B0E1394E8B85D
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MAROZZI, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 AUGUSTA POINTE
 City PALM BEACH GARDENS State FL Zip Code 33418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A8EF804E13553457986F
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MARROTTA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 N. A1A, LOT 28
 City JUPITER State FL Zip Code 33477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A398FB55729654CB79FD
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1295 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARROTTA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 N. A1A, LOT 28

City JUPITER	State FL	Zip Code 33477
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 04 / 12 / 2021
Transaction ID : A6528DEBB1CB148E88D2

Amount of Each Receipt this Period
 50.00

Memo Item

B. MARROTTA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 N. A1A, LOT 28

City JUPITER	State FL	Zip Code 33477
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 04 / 13 / 2021
Transaction ID : A0F3FCE356FE045E2B58

Amount of Each Receipt this Period
 25.00

Memo Item

C. MARROTTA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 N. A1A, LOT 28

City JUPITER	State FL	Zip Code 33477
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 04 / 28 / 2021
Transaction ID : ADCF0786AD3C04D28A2B

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1296 OF 3012
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARROTTA, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 N. A1A, LOT 28

City JUPITER	State FL	Zip Code 33477
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2021

Transaction ID : A650F46846F5D49B4B16

Amount of Each Receipt this Period
50.00

Memo Item

B. MARROTTA, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 N. A1A, LOT 28

City JUPITER	State FL	Zip Code 33477
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2021

Transaction ID : A8B4D7C73631A4B2E843

Amount of Each Receipt this Period
25.00

Memo Item

C. MARROTTA, VIRGINIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 N. A1A, LOT 28

City JUPITER	State FL	Zip Code 33477
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2021

Transaction ID : A3787E1BDBFFD4CE1A4B

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1297 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARROTTA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 N. A1A, LOT 28
 City JUPITER State FL Zip Code 33477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A2F51FB77F848450F8DD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARROTTA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 N. A1A, LOT 28
 City JUPITER State FL Zip Code 33477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AAC3920D2A0234F0C8B7
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MARROTTA, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 N. A1A, LOT 28
 City JUPITER State FL Zip Code 33477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A68E74514C3F64DD4A3B
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1298 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARSHALL, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 KINGS GATE BOULEVARD
 City DAYTON State OH Zip Code 45431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A93C04D5F53E64A31AAA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARSHALL, EDWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 KINGS GATE BOULEVARD
 City DAYTON State OH Zip Code 45431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 24 / 2021
Transaction ID : AECA35CF1BBEA4548BFE
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MARSH, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9708 EVELYN AVE
 City CALIFORNIA CITY State CA Zip Code 93505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANALYTICAL MECHANICS ASSOCIATES INC Occupation (for Individual) QUALITY INSPECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A3E4DE1255724415CAFD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1299 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARSH, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9708 EVELYN AVE
 City CALIFORNIA CITY State CA Zip Code 93505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANALYTICAL MECHANICS ASSOCIATES INC Occupation (for Individual) QUALITY INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : A4700B2566B7E44128CA
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. MARSH, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9708 EVELYN AVE
 City CALIFORNIA CITY State CA Zip Code 93505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANALYTICAL MECHANICS ASSOCIATES INC Occupation (for Individual) QUALITY INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : ADE09555A291F40D283A
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MARSH, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9708 EVELYN AVE
 City CALIFORNIA CITY State CA Zip Code 93505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANALYTICAL MECHANICS ASSOCIATES INC Occupation (for Individual) QUALITY INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A447E22B0B3604CDF850
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1300 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARSH, LEROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9708 EVELYN AVE
 City CALIFORNIA CITY State CA Zip Code 93505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANALYTICAL MECHANICS ASSOCIATES INC Occupation (for Individual) QUALITY INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A8EF5F6561BC543DA84D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARSH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1290
 City PIGEON FORGE State TN Zip Code 37868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 14 / 2021
Transaction ID : ACBA1940072BF4469BF6
 Amount of Each Receipt this Period 200.00
 Memo Item

C. MARSH, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1290
 City PIGEON FORGE State TN Zip Code 37868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A4771251C416C4905A75
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1301 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARSICO, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23203 DORIS WAY
 City TORRANCE State CA Zip Code 90505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VILLAGE VIEW ESCROW INC Occupation (for Individual) SELF - ESCROW OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : AC07C2C017DF9445D824
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARSICO, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23203 DORIS WAY
 City TORRANCE State CA Zip Code 90505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VILLAGE VIEW ESCROW INC Occupation (for Individual) SELF - ESCROW OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 15 / 2021**
Transaction ID : A4A389E67CEFA43D2BEF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MARS LAND, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3240 FALLING LEAF RD
 City SHOW LOW State AZ Zip Code 85901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 09 / 2021**
Transaction ID : A999226972C9A42A7AB7
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1302 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARSLAND, JULIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3240 FALLING LEAF RD
 City SHOW LOW State AZ Zip Code 85901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : ABC657AF61336412A9DD
 Amount of Each Receipt this Period 200.00
 Memo Item

B. MARSTON, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 CHARLES ST,
 City FOREST CITY State NC Zip Code 28043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **04 / 08 / 2021**
Transaction ID : A93085CDCE0AD4BCF81E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MARTENS, WANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WATERFORD DR
 City MILLS RIVER State NC Zip Code 28759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : A09C44A1EC18644D68D2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1303 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2702 N WALNUT HILLS DR
 75
 City FLAGSTAFF State AZ Zip Code 86004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAMOND OFFSHORE DRILLING Occupation (for Individual) OCCUPATIONAL SAFETY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A4A3C936645D147DA813
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MARTIN, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2702 N WALNUT HILLS DR
 75
 City FLAGSTAFF State AZ Zip Code 86004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIAMOND OFFSHORE DRILLING Occupation (for Individual) OCCUPATIONAL SAFETY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A600FF2DD170D49CC911
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MARTIN, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9521 HIGHLAND VIEW DR.
 City DALLAS State TX Zip Code 75238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : A44EFA1993AC411799C
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1304 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINETTO, MARILYN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 WORTHINGTON
 City STEILACOOM State WA Zip Code 98388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ABF0C08CCD99D4CF4A8E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A763D740743504130978
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 28 / 2021
Transaction ID : A7B6092224EED45AD837
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1305 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **03 / 29 / 2021**
Transaction ID : A72E7316ADEF4994AA9
 Amount of Each Receipt this Period 5.00
 Memo Item

B. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A32C1898D5C1047409F1
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **04 / 09 / 2021**
Transaction ID : A6AA1F6B47D624366B62
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1306 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 04 / 15 / 2021
Transaction ID : A7F0D5E572AB34FC1BD8
 Amount of Each Receipt this Period 10.00
 Memo Item

B. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 04 / 23 / 2021
Transaction ID : AB86F15DD17364F888D9
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 04 / 28 / 2021
Transaction ID : AFA58D23424C346179DA
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1307 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : A350FB951CFF5401E855
 Amount of Each Receipt this Period 5.00
 Memo Item

B. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : AA2381E358331438A97B
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt **05 / 09 / 2021**
Transaction ID : AA905FCA570B5417E972
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1308 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, ANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21612 FLAMENCO

City MISSION VIEJO	State CA	Zip Code 92962
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADAMS STREETER ENGINEERING	Occupation (for Individual) MAPPING DESIGNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : A7DC9ADBE15B644A2AEz

Amount of Each Receipt this Period
10.00

Memo Item

B. MARTINEZ, ANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21612 FLAMENCO

City MISSION VIEJO	State CA	Zip Code 92962
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADAMS STREETER ENGINEERING	Occupation (for Individual) MAPPING DESIGNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : AF1DC48BDA7E54CE2986

Amount of Each Receipt this Period
10.00

Memo Item

C. MARTINEZ, ANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21612 FLAMENCO

City MISSION VIEJO	State CA	Zip Code 92962
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADAMS STREETER ENGINEERING	Occupation (for Individual) MAPPING DESIGNER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : A5497135EE0E747C4B25

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1309 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 29 / 2021
Transaction ID : AB08D3ECE251E4B33965
 Amount of Each Receipt this Period 5.00
 Memo Item

B. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A5AEAEDD305D64A169B6
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A81DC2E7E4DE04EF38EF
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1310 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AB68D610DAAA54AFFA55
 Amount of Each Receipt this Period 10.00
 Memo Item

B. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A46CE6A00E8BB439A927
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AD2F8714F04AD463F9A4
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

30.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1311 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, ANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21612 FLAMENCO
 City MISSION VIEJO State CA Zip Code 92962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADAMS STREETER ENGINEERING Occupation (for Individual) MAPPING DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AEB379D1959AD4BCC987
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARTINEZ, NORMA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26332 ALTAS PALMAS RD
 City HARLINGEN State TX Zip Code 78552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RHISD Occupation (for Individual) TEACHER/SCHOOL COUNSELOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A4140CF3950D34DA5A90
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MARTINEZ, NORMA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26332 ALTAS PALMAS RD
 City HARLINGEN State TX Zip Code 78552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RHISD Occupation (for Individual) TEACHER/SCHOOL COUNSELOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A11DE63C13E0344C9847
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1312 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINEZ, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 821 N. WILCOX AVENUE
130

City MONTEBELLO State CA Zip Code 90640

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021

Transaction ID : A8E166411679645D2A7A

Amount of Each Receipt this Period
 50.00

Memo Item

B. MARTINEZ, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 821 N. WILCOX AVENUE
130

City MONTEBELLO State CA Zip Code 90640

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021

Transaction ID : A7B3A324CBEE54901A50

Amount of Each Receipt this Period
 50.00

Memo Item

C. MARTIN, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8605 AMESTOY AVENUE

City SHERWOOD FOREST State CA Zip Code 91325-3405

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021

Transaction ID : A6B76F1810B70488290C

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1313 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8605 AMESTOY AVENUE

City SHERWOOD FOREST	State CA	Zip Code 91325-3405
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A2A212FD552A74ACBA69

Amount of Each Receipt this Period
100.00

Memo Item

B. MARTINI, MICHAELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 722 QUAKER ROAD

City NORTH FALMOUTH	State MA	Zip Code 02556
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JML CARE CENTER	Occupation (for Individual) REGISTERED NURSE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2021

Transaction ID : A64B75B561EB848B9B1E

Amount of Each Receipt this Period
25.00

Memo Item

C. MARTINI, MICHAELA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 722 QUAKER ROAD

City NORTH FALMOUTH	State MA	Zip Code 02556
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JML CARE CENTER	Occupation (for Individual) REGISTERED NURSE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2021

Transaction ID : A602BE5535E164207863

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1314 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINI, MICHAELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 QUAKER ROAD
 City NORTH FALMOUTH State MA Zip Code 02556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JML CARE CENTER Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A44AABD3F71D14A32AB6
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MARTINI, MICHAELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 QUAKER ROAD
 City NORTH FALMOUTH State MA Zip Code 02556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JML CARE CENTER Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AD98707CCF6DB4AEF899
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MARTIN, JODI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21531 SW ATHEY RD
 City WEST LINN State OR Zip Code 97068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HELIX HOMES LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2021
Transaction ID : A056BC59D834F43BBB48
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1315 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, JODI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21531 SW ATHEY RD
 City WEST LINN State OR Zip Code 97068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HELIX HOMES LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A0950379A9FBD41E3A2F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARTIN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1823
 City CAROLINA BEACH State NC Zip Code 28428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A2F07CC15F1214BEDA57
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MARTIN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1823
 City CAROLINA BEACH State NC Zip Code 28428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A5CB8B774BBB44D218E1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1316 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 814
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A1C4B39605958495ABD7
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MARTIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 814
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : ADE04A47BC62148E0949
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MARTIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 814
 City LAKE FOREST State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : AD666FDCB8B864EF989F
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1317 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1373 FLANAGAN DRIVE
 City CHRISTIANSBURG State VA Zip Code 24073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A60ABDADC3C744F1D925
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARTIN, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1373 FLANAGAN DRIVE
 City CHRISTIANSBURG State VA Zip Code 24073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ABF171F3DC30047039CE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR.
 City SUN CITY WEST State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A6E41C64D93E64822B65
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1318 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR.
 City SUN CITY WEST State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 29 / 2021
Transaction ID : AC272063B0BB84B5DA52
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR.
 City SUN CITY WEST State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ACE3FBF6938B2444F885
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR.
 City SUN CITY WEST State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 06 / 20 / 2021
Transaction ID : AFB785A4638CF4AB9BB1
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1319 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARVEL, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 BENTLEY CT
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONG RIDER CONSULTING PARTNERS Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : ABFB49C0D132845A79BA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MARVEL, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 BENTLEY CT
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONG RIDER CONSULTING PARTNERS Occupation (for Individual) MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AF5313850964C478D908
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A5866948B0D644C21ABC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1320 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 11 / 2021
Transaction ID : A92DCD993E2D747F880B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 12 / 2021
Transaction ID : AB9A83217DF524F61896
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A7483302A72E741A496E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1321 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A9FCE355020B54667B6B
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : ABC7726478A0A45C78A1
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A7774CBD7AF274DE181F
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1322 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : AA46418BE8A5440D5BEC
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : A32B3083EC572494092F
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A4730FBF44F9940DABB2
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

120.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1323 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A28153EE527BE4388A9D
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A7CD2F8CC4B0E4622A34
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : ADBEF2615D7694F99889
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1324 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A8CC4B40EE58D4801B33
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AAA4C6427215E492B8D2
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A15554D555BF5493DA20
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1325 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 795.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A21370A8CD4704518920
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 820.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A394B54E2300D4690A86
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AD87A4BBB68654F6D98F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1326 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, JUANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 WATER ST
 2402
 City BALTIMORE State MD Zip Code 21202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 905.00

Date of Receipt
 06 / 29 / 2021
Transaction ID : A4B71C443204A4F99AC3
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MASSEY, PATTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 CHERRY PARK DRIVE
 City MEMPHIS State TN Zip Code 38120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 04 / 03 / 2021
Transaction ID : AC1A804FC29F04ED0A7E
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MASSEY, PATTI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 CHERRY PARK DRIVE
 City MEMPHIS State TN Zip Code 38120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 05 / 03 / 2021
Transaction ID : A6FA302D90D4E4F15A97
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1327 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASSEY, PATTI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1590 CHERRY PARK DRIVE

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2021

Transaction ID : A3A8E5F0CEE9746CF9EE

Amount of Each Receipt this Period
50.00

Memo Item

B. MASSIE, ANGELICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12103 GURLEY AVE

City DOWNEY	State CA	Zip Code 90242
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2021

Transaction ID : A2FB598872DE64114B19

Amount of Each Receipt this Period
100.00

Memo Item

C. MASSIE, ANGELICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12103 GURLEY AVE

City DOWNEY	State CA	Zip Code 90242
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2021

Transaction ID : A274E52FE8D19489CA6A

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1328 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASSIE, ANGELICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12103 GURLEY AVE
 City DOWNEY State CA Zip Code 90242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : AC1FEFB4641FA4501891
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MASSIE, ANGELICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12103 GURLEY AVE
 City DOWNEY State CA Zip Code 90242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A17C7C928E0D444E7BF0
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MASSIE, ANNE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 590 BAY HILL
 City AUGUSTA State GA Zip Code 30907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A5A203CF1E48D4450A3E
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1329 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASSIE, ANNE, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 590 BAY HILL
 City AUGUSTA State GA Zip Code 30907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AFF5F5E2CAD50408E92D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MASTROMATTO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 MOUNTAIN RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A57E40887B49244BF969
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MASTROMATTO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 MOUNTAIN RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : A399BBA7AC0A54F72B56
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1330 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASTROMATTO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 MOUNTAIN RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : A474B6D7C1BAD43E2810
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MASTROMATTO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 MOUNTAIN RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **05 / 16 / 2021**
Transaction ID : AA772A34F8B004353BB4
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MASTROMATTO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 MOUNTAIN RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : A907D96F94DF14A599A0
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1331 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASTROMATTO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 MOUNTAIN RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A8D0E90042EE94D58BB0
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MASTROMATTO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 MOUNTAIN RD
 City HAMBURG State PA Zip Code 19526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A230E51190AD74626829
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MATHEWS, TERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 PALOMARES AVE.
 City VENTURA State CA Zip Code 93003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 222.50

Date of Receipt 06 / 16 / 2021
Transaction ID : A47DA567B09B74CF087D
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1332 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MATHEWS, TERI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 PALOMARES AVE.
 City VENTURA State CA Zip Code 93003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : A42D4C515052E4090AC5
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. MATRONI, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3543 S WASHINGTON AVE
 City TITUSVILLE State FL Zip Code 32780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A33C5CB66BA384DE08F8
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MATRONI, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3543 S WASHINGTON AVE
 City TITUSVILLE State FL Zip Code 32780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A953593D6646B4D9AAF6
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1333 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MATTHEWS, GEORGE, G, ,

Mailing Address 1925 N. FLAGLER DR.

City W. PALM BEACH	State FL	Zip Code 33407
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021

Transaction ID : A3D9365DA04B74235BD6

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MATTHEWS, GEORGE, G, ,

Mailing Address 1925 N. FLAGLER DR.

City W. PALM BEACH	State FL	Zip Code 33407
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021

Transaction ID : A3CDCDAE7837C4DF5891

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MATTHEWS, PATRICK, , ,

Mailing Address 1704 SOUTHMORE BLVD

City HOUSTON	State TX	Zip Code 77004
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021

Transaction ID : AEA7DECA2FA2F4FA6954

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1334 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MATTHEWS, PATRICK, , ,

Mailing Address 1704 SOUTHMORE BLVD

City HOUSTON	State TX	Zip Code 77004
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021

Transaction ID : AB87862E148F2413E99C

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MATTHEWS, PATRICK, , ,

Mailing Address 1704 SOUTHMORE BLVD

City HOUSTON	State TX	Zip Code 77004
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021

Transaction ID : A8209ACA607164A89BA7

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MATTHEWS, PATRICK, , ,

Mailing Address 1704 SOUTHMORE BLVD

City HOUSTON	State TX	Zip Code 77004
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021

Transaction ID : A2EC283EE95A943F5A7E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1335 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MATTHEWS, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1704 SOUTHMORE BLVD
 City HOUSTON State TX Zip Code 77004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A9986F115CB03466ABDE
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MATTHEWS, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1704 SOUTHMORE BLVD
 City HOUSTON State TX Zip Code 77004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 30 / 2021
Transaction ID : ACC19198E416542B4BF0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MATTINGLY, HOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3996 W. FM469
 City COTULLA State TX Zip Code 78014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SPRAYING BRUSH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : ACC5157A0AAEA4B4097E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1336 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MATTINGLY, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9321 TIMBERLINE WAY
 City INDIANAPOLIS State IN Zip Code 46256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A3B603C1FBE5D4FDE921
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MATTINGLY, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9321 TIMBERLINE WAY
 City INDIANAPOLIS State IN Zip Code 46256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A2A84DC8C7BE942BBBB6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MATTOS, JONI, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 HAMMEL RD
 City PETALUMA State CA Zip Code 94952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 28 / 2021
Transaction ID : AA0651EC7410C401186A
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1337 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAXEY, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16107 COPPERKEY COURT
 City GROVER State MO Zip Code 63040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A4A5D0E699AA54CB4A0C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MAXEY, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16107 COPPERKEY COURT
 City GROVER State MO Zip Code 63040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A09EA06B642064260A71
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MAXWELL, EMORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 LYME CT
 City ROSWELL State GA Zip Code 30075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : ACF4E4ADFFAED4874A74
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1338 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAXWELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 THE HIGHLANDS
 City TUSCALOOSA State AL Zip Code 35404-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : AF22847FAF9E44708A91
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MAXWELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 THE HIGHLANDS
 City TUSCALOOSA State AL Zip Code 35404-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2021
Transaction ID : ABD52AED1F29845409B0
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MAXWELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 THE HIGHLANDS
 City TUSCALOOSA State AL Zip Code 35404-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A132DB783BE6843639BF
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1339 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAXWELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 THE HIGHLANDS
 City TUSCALOOSA State AL Zip Code 35404-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A950B7B8CFFDA4D28AB2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MAYCLIN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 SAGE ST
 City CLAREMONT State CA Zip Code 91711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A251FC8AAD6F24C54BDD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MAYCLIN, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 659 SAGE ST
 City CLAREMONT State CA Zip Code 91711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AFE2BCDA4EA354207830
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1340 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAYDAN, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 WINSTON DRIVE
 12AN
 City CLIFFSIDE PARK State NJ Zip Code 07010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY RX PHARMACY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : ABFF608CC50F7416288A
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MAYDAN, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 WINSTON DRIVE
 12AN
 City CLIFFSIDE PARK State NJ Zip Code 07010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY RX PHARMACY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A0FD48408C0D445178C3
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MAYDAN, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 WINSTON DRIVE
 12AN
 City CLIFFSIDE PARK State NJ Zip Code 07010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY RX PHARMACY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A89AA3370DEB04ACE979
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1341 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAYDAN, ALEXANDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 WINSTON DRIVE
 12AN
 City CLIFFSIDE PARK State NJ Zip Code 07010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUALITY RX PHARMACY Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AC71A8781CBDB4D8DB65
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MAYER, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2385 SUNLIGHT BEACH ROAD
 City CLINTON State WA Zip Code 98236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 01 / 2021
Transaction ID : AD4FE9D2CEC1F447DBEC
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MAYER, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2385 SUNLIGHT BEACH ROAD
 City CLINTON State WA Zip Code 98236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A6CC7938E4E4A4935901
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1342 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAYFIELD, DENESE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 285 WOODLAND BAYOU DR
 City SANTA ROSA BEACH State FL Zip Code 32459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 15 / 2021
Transaction ID : A6B19457B4065434CBD4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MAYNARD, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 OAK RIDGE ROAD
 City GATESVILLE State TX Zip Code 76528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORYELL HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 05 / 30 / 2021
Transaction ID : A10D0349361E14015B63
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MAYNARD, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 OAK RIDGE ROAD
 City GATESVILLE State TX Zip Code 76528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORYELL HEALTH Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : AF16923EC116D479DB8C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1343 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAYO, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11483 CHESTERTON DRIVE

City RANCHO CUCAMONGA	State CA	Zip Code 91730
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE SALES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : AB3EEF1CF683B4EFF914

Amount of Each Receipt this Period
50.00

Memo Item

B. MAYO, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11483 CHESTERTON DRIVE

City RANCHO CUCAMONGA	State CA	Zip Code 91730
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE SALES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Transaction ID : A9D5B019066204EB7889

Amount of Each Receipt this Period
50.00

Memo Item

C. MAYS, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 PENN LEAR DRIVE

City MONROEVILLE	State PA	Zip Code 15146
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A4E80DD6AF6D040BB8D9

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1344 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAYS, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 PENN LEAR DRIVE

City MONROEVILLE	State PA	Zip Code 15146
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2021

Transaction ID : A8ACFE48807DA49BEBFC

Amount of Each Receipt this Period
5.00

Memo Item

B. MAYS, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 160 PENN LEAR DRIVE

City MONROEVILLE	State PA	Zip Code 15146
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2021

Transaction ID : A2152238B03694341BA6

Amount of Each Receipt this Period
5.00

Memo Item

C. MAYTH, MONTY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address E 3833 BRIDGEVIEW DRIVE

City HARRISON	State ID	Zip Code 83833
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2021

Transaction ID : A078D06F3E2A84CDD9B5

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1345 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAYTNER, CHRISTEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8070 GANDY CT
 City GROSSE ILE State MI Zip Code 48138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 11 / 2021**
Transaction ID : AE4FC53BC0F0346AAA3F
 Amount of Each Receipt this Period 200.00
 Memo Item

B. MAY, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 ROYAL BIRKDALE DR.
 City TARPON SPRINGS State FL Zip Code 34688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : AA204FEBECF5D4AD8A92
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MAY, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 ROYAL BIRKDALE DR.
 City TARPON SPRINGS State FL Zip Code 34688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : AC697107F0B5D43179E2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1346 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAY, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 ROYAL BIRKDALE DR.
 City TARPON SPRINGS State FL Zip Code 34688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A1A2AB4AC81B64DF9BEE
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MAY, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 ROYAL BIRKDALE DR.
 City TARPON SPRINGS State FL Zip Code 34688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A7BB4988DA2094C97BB4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MC DREW, GINNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8880 AUBURN VALLEY RD
 City AUBURN State CA Zip Code 95602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A12C481D2EFA04928963
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1347 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCALLISTER, ETIENNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 FOXVIEW
 City FAIRBANKS State AK Zip Code 99712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BIG MAC INC. SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 06 / 23 / 2021
Transaction ID : AFCD63C9E5F954FDBAE#
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCALLISTER, ETIENNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 780 FOXVIEW
 City FAIRBANKS State AK Zip Code 99712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BIG MAC INC. SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 06 / 28 / 2021
Transaction ID : AC5DDEF8F17CD405BA71
 Amount of Each Receipt this Period 5.00
 Memo Item

C. MCARTOR, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX1122
 City CODY State WY Zip Code 82414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 04 / 07 / 2021
Transaction ID : AD0E400611D664E23AEA
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 555.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 1348 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCBRIDE, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2022 STANDING ROCK RD.
 City SENOIA State GA Zip Code 30276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : AD5F39AE42B834EC78B2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MCCALLUM, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1886 E. MAIN STREET
 City EMMETT State ID Zip Code 83617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A6F5924085501417A812
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MCCALLUM, JON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1886 E. MAIN STREET
 City EMMETT State ID Zip Code 83617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : AAB00A9C012E44D1EBCE
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1349 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCARNEY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 ARROW COURT
 City CLIFTON State CO Zip Code 81520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STONEMOR PARTNERS Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A6A625C43D9AF44FABE9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCCARTHY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 BATTERY ST PH07
 City BOSTON State MA Zip Code 02109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE TRANS LEASE GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : AB25FF9F7ED2E49A8B4A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCCARTHY, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 BATTERY ST PH07
 City BOSTON State MA Zip Code 02109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE TRANS LEASE GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A57BAA5F2C5D341198B2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1350 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCARTHY, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13246 BATTEN LANE

City ODESSA	State FL	Zip Code 33556
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2021

Transaction ID : A3281136B52084744A55

Amount of Each Receipt this Period
100.00

Memo Item

B. MCCARTHY, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13246 BATTEN LANE

City ODESSA	State FL	Zip Code 33556
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2021

Transaction ID : AF779C403759E44E0A3A

Amount of Each Receipt this Period
100.00

Memo Item

C. MCCARTHY, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13246 BATTEN LANE

City ODESSA	State FL	Zip Code 33556
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2021

Transaction ID : ADD9E316812EE4B2E93E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1351 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCARTHY, JUDITH, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1299 ORCHARD RIDGE
 City BLOOMFIELD HILLS State MI Zip Code 48304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A708BE44493034D01ADC
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MCCARTY, W. A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 KINGSGATE
 City AMARILLO State TX Zip Code 79119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : AD3D6115416164FB083C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCCARTY, W. A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7801 KINGSGATE
 City AMARILLO State TX Zip Code 79119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : AE2D73160904241B39DA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1352 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCLANE, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5101 BROADWAY
 SUITE 101
 City SAN ANTONIO State TX Zip Code 78209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FINAN CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : AFFEF02A4B3A84A9D811
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCCLANE, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5101 BROADWAY
 SUITE 101
 City SAN ANTONIO State TX Zip Code 78209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FINAN CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : ABE976D6C1C7A4BD29D2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCCLELLAN, DIXIE, LER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2936 SPANNTOWN ROAD
 City ARRINGTON State TN Zip Code 37014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 16 / 2021**
Transaction ID : A0978A2E84E4145348F2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1353 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCLOUD, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2406 DUNZWEILER
 City ZANESVILLE State OH Zip Code 43701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : AA08D39BE3CB64D6DA6F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCCLURE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2935
 City WYLIE State TX Zip Code 75098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : AB4ABCDCCFF9E41BD9F1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCCLURE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2935
 City WYLIE State TX Zip Code 75098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : ACCC0D9F8CC0E4E728D1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1354 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCORD, GAYLA, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8422 BLOODWORTH LANE
 City MARION State IL Zip Code 62959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A114F327A2F5847EFAE3
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCCORMICK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 PINE DR
 City POCA State WV Zip Code 25159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NITRO CHURCH OF GOD Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A817FA83C9F204705AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCCORMICK, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 PINE DR
 City POCA State WV Zip Code 25159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NITRO CHURCH OF GOD Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A63D886A3E0454B9DA50
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1355 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCOY, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5711 N 24TH AVE
 City PHOENIX State AZ Zip Code 85015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A9108A7003858462CB52
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCCOY, ROSALINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18521 MAYALL STREET L
 City NORTHRIDGE State CA Zip Code 91324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVITA Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A6088A5107E446FB9AF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCCOY, ROSALINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18521 MAYALL STREET L
 City NORTHRIDGE State CA Zip Code 91324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVITA Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A279DC97C7A6E45ABB33
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1356 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCRACKEN, PEGGY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 MARY SCOTT DR

City GOOSE CREEK	State SC	Zip Code 29445
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2021

Transaction ID : A2F14CC21697F4A428EB

Amount of Each Receipt this Period
75.00

Memo Item

B. MCCRACKEN, PEGGY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 MARY SCOTT DR

City GOOSE CREEK	State SC	Zip Code 29445
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2021

Transaction ID : A5E55E4656A38495F9C5

Amount of Each Receipt this Period
75.00

Memo Item

C. MCCRACKEN, PEGGY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 MARY SCOTT DR

City GOOSE CREEK	State SC	Zip Code 29445
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : A7D00137F078E4638956

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1357 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCRACKEN, PEGGY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 MARY SCOTT DR

City GOOSE CREEK	State SC	Zip Code 29445
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : AA251B0305C554A989B2

Amount of Each Receipt this Period
75.00

Memo Item

B. MCDANIEL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 LAKE MIRROR DRIVE

City LAKE PLACID	State FL	Zip Code 33852
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2021

Transaction ID : A2CB5C0B41B194E76B12

Amount of Each Receipt this Period
100.00

Memo Item

C. MCDANIEL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 LAKE MIRROR DRIVE

City LAKE PLACID	State FL	Zip Code 33852
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2021

Transaction ID : A17B710E0E7E44D9C83F

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1358 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCDONALD, BARBARA, , ,

Mailing Address 1809 HAWTHORNE DR

City RICHOMD	State TX	Zip Code 77469
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2021

Transaction ID : ACCDCDC0039C44670866

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCDONALD, BARBARA, , ,

Mailing Address 1809 HAWTHORNE DR

City RICHOMD	State TX	Zip Code 77469
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2021

Transaction ID : AEA829E7A35FB4B6A9CE

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCDONALD, BARBARA, , ,

Mailing Address 1809 HAWTHORNE DR

City RICHOMD	State TX	Zip Code 77469
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

Transaction ID : A86D1B5191DB147B0B80

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1359 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCDONALD, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORNE DR
 City RICHOMD State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **03 / 08 / 2021**
Transaction ID : A3E6487B094354BE4892
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MCDONALD, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORNE DR
 City RICHOMD State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt **04 / 08 / 2021**
Transaction ID : A4FB33BA2CB2D4F728D7
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MCDONALD, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORNE DR
 City RICHOMD State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt **05 / 07 / 2021**
Transaction ID : AD068CF50DCC2471FA45
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1360 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCDONALD, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORNE DR
 City RICHOMD State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A86C939E942664B02860
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. MCDONALD, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORNE DR
 City RICHOMD State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AC741AD96849642B29A7
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. MCDONALD, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORNE DR.
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : AC2433003D5904FB19D9
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 1361 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCDONALD, MATTHEW, J., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11760 E. MILES ST.

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021

Transaction ID : A2D9DB9DB81E6445F9F9

Amount of Each Receipt this Period
100.00

Memo Item

B. MCDONALD, MATTHEW, J., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11760 E. MILES ST.

City TUCSON	State AZ	Zip Code 85748
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021

Transaction ID : A082611C5AA4D438CB42

Amount of Each Receipt this Period
100.00

Memo Item

C. MCDONALD, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 BEAVER LA

City STOCKTON	State CA	Zip Code 95203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021

Transaction ID : A4F121915CD234AD6A5B

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1362 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCDONALD, ROBERT, , ,

Mailing Address 710 BEAVER LA

City STOCKTON	State CA	Zip Code 95203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2021

Transaction ID : AEBF809738A6F49E5B23

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCDONALD, ROBERT, , ,

Mailing Address 710 BEAVER LA

City STOCKTON	State CA	Zip Code 95203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : AC6D97A29A67645888FE

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCDONALD, ROBERT, , ,

Mailing Address 710 BEAVER LA

City STOCKTON	State CA	Zip Code 95203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) DEVELOPER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : AE7171977D01E40389EE

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1363 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCDONNELL, KAY, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 DAVID DRIVE
 City MADISON State MS Zip Code 39110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A317EC172080244B0AFA
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MCDOWELL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7111 E PARADISE RANCH RD
 City PARADISE VALLEY State AZ Zip Code 85253-3178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : AB7DA6E9E298F42CAAD9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MCDOWELL, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7111 E PARADISE RANCH RD
 City PARADISE VALLEY State AZ Zip Code 85253-3178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A4D2E52AEF4DF4072A9A
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1364 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCELREATH, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 SHADYSIDE AVENUE

City EAST LIVERPOOL	State OH	Zip Code 43920
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2021

Transaction ID : A88576DC885784354AAB

Amount of Each Receipt this Period
50.00

Memo Item

B. MCELREATH, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 SHADYSIDE AVENUE

City EAST LIVERPOOL	State OH	Zip Code 43920
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2021

Transaction ID : A3AECA4F3E42B49A4A6B

Amount of Each Receipt this Period
50.00

Memo Item

C. MCELWAIN, FLOYD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 NW ROSECRANS RD

City SAINT JOSEPH	State MO	Zip Code 64503
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2021

Transaction ID : A87EA0DCFB0E34C01A6D

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1365 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCELWEE, ELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 267 ANGEL LANE
 City NEW ENTERPRISE State PA Zip Code 16664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTH BY CHOICE INC Occupation (for Individual) NUTRITION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A41861EDEB112451DAD6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCEVOY, SARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3131 CONSERVANCY LANE
 City CHARLESTON State SC Zip Code 29414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A293179E337BC4683B19
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MCFARLAND, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 740 BUNKER DR.
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBACH PHYSICAL THERAPY Occupation (for Individual) PHYSICAL THERAPIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2021
Transaction ID : A9EA2990CAA9D4866A5B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1366 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCFARLAND, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 740 BUNKER DR.
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OBACH PHYSICAL THERAPY Occupation (for Individual) PHYSICAL THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A6BB9B0770E6A478DBF0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2021
Transaction ID : A1D05022D27344C37A7D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 25 / 2021
Transaction ID : A2446827B5D944579B98
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1367 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A28E6D7D31D404161B55
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 25 / 2021**
Transaction ID : AE89966EB5CBA40539AC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 23 / 2021**
Transaction ID : A90A72E5B8ECE4A5A892
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1368 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : A1DA340981C824BF0B1D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **06 / 23 / 2021**
Transaction ID : AA033EF9C61E84176AF8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCFARREN, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 E. MCEWEN DR
 City FRANKLIN State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 25 / 2021**
Transaction ID : A78D29C4E8991499E942
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1369 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCGINNID, CAROLYN, , ,

Mailing Address 27 WEST OAK DR

City HOUSTON	State TX	Zip Code 77056
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2021

Transaction ID : A739FBF61E7F54D6B8E1

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCGINNID, CAROLYN, , ,

Mailing Address 27 WEST OAK DR

City HOUSTON	State TX	Zip Code 77056
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2021

Transaction ID : AE967E6E590D0428FA7D

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCGINNID, CAROLYN, , ,

Mailing Address 27 WEST OAK DR

City HOUSTON	State TX	Zip Code 77056
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2021

Transaction ID : AED923BDDA04942CEBA0

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1370 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCGINNID, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 WEST OAK DR
 City HOUSTON State TX Zip Code 77056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 13 / 2021
Transaction ID : ABEC91CCB361D4EB483C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCGINTY, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 SUNFLOWER TRL
 City LULING State TX Zip Code 78648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER, AND RETIRED ARMY OFI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A82E5B5E3856346D5A88
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MCGRATH, OWEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3648 VIRGIN ISLANDS CT
 City PLEASANTON State CA Zip Code 94588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A1D0A35D429D2413A85D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1371 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCGRATH, OWEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3648 VIRGIN ISLANDS CT
 City PLEASANTON State CA Zip Code 94588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AD36668C6DBD14755828
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCGREEVY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2161 CHAIN BRIDGE ROAD
 City VIENNA State VA Zip Code 22182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NDI Occupation (for Individual) EVP/BD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A2E96D01B11CA4BC4BDA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCGREEVY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2161 CHAIN BRIDGE ROAD
 City VIENNA State VA Zip Code 22182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NDI Occupation (for Individual) EVP/BD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A04BCC05BD9EC4A488A7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1372 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCINROE, PHILP, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 462
 City GRAND BERRY State TX Zip Code 76048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OIL SERVICE COMPANY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 23 / 2021
Transaction ID : A4088FF84D91A45D8940
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MCINTOSH, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1179 ETON AVE.
 City ASHEBORO State NC Zip Code 27203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A6150BC6524C34431AA7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCINTOSH, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1179 ETON AVE.
 City ASHEBORO State NC Zip Code 27203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A1AEA9144B1724F4FA0A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1373 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCINTOSH, JULIAN, , ,

Mailing Address 1179 ETON AVE.

City ASHEBORO	State NC	Zip Code 27203
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2021

Transaction ID : A671DF4D121F84B90936

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCINTOSH, JULIAN, , ,

Mailing Address 1179 ETON AVE.

City ASHEBORO	State NC	Zip Code 27203
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2021

Transaction ID : A0FE8BC776CB642E2B3E

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MCINTOSH, JULIAN, , ,

Mailing Address 1179 ETON AVE.

City ASHEBORO	State NC	Zip Code 27203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2021

Transaction ID : A031B05FAF33F492B82B

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1374 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCINTOSH, JULIAN, , ,

Mailing Address 1179 ETON AVE.

City ASHEBORO	State NC	Zip Code 27203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021

Transaction ID : A052A4EE06CE2446F98D

Amount of Each Receipt this Period
 35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCINTOSH, JULIAN, , ,

Mailing Address 1179 ETON AVE.

City ASHEBORO	State NC	Zip Code 27203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021

Transaction ID : A9BA8A45F23A24BF1975

Amount of Each Receipt this Period
 50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCINTOSH, JULIAN, , ,

Mailing Address 1179 ETON AVE.

City ASHEBORO	State NC	Zip Code 27203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021

Transaction ID : A681CB85965F34C788DC

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1375 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCINTYRE, EDNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3931 GOLDEN SHORES DR
 City MISSOURI CITY State TX Zip Code 77459-7619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICAL THERAPIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A88FB66B6A1FC4901A8D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCKEE, MARGARET, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 153
 City FRANNIE State WY Zip Code 82423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 08 / 2021**
Transaction ID : A71A75439D0BE49CA92E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MCKNIGHT, LINDA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 IVORY LANE
 City RALEIGH State NC Zip Code 27610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 19 / 2021**
Transaction ID : AB3C9DC2E4B9A46B3891
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1376 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCKNIGHT, LINDA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 IVORY LANE
 City RALEIGH State NC Zip Code 27610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A91FF1102811940BFBB6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCKNIGHT, LINDA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 IVORY LANE
 City RALEIGH State NC Zip Code 27610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AEB2E23E05D424B58B05
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCKNIGHT, LINDA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 239 IVORY LANE
 City RALEIGH State NC Zip Code 27610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AA758DBB2CE264698A2B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1377 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCLAIN, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1497 ARENA CT
 City BULLHEAD CITY State AZ Zip Code 86442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AE6461F49ED7F4812BEC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCLAUGHLIN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10035 63RD AVE. N. #24
 City SAINT PETERSBURG State FL Zip Code 33708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 17 / 2021
Transaction ID : A3755C67F1E574E3AA82
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MCLAUGHLIN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10035 63RD AVE. N. #24
 City SAINT PETERSBURG State FL Zip Code 33708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 17 / 2021
Transaction ID : A2EA6C4527C574232BAA
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1378 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCLAUGHLIN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10035 63RD AVE. N. #24
 City SAINT PETERSBURG State FL Zip Code 33708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 17 / 2021
Transaction ID : AB0600861B6D846CA82B
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MCLAUGHLIN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10035 63RD AVE. N. #24
 City SAINT PETERSBURG State FL Zip Code 33708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 17 / 2021
Transaction ID : ABBA3EFD0FCC04410B7C
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MCLEAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9423 HARALSON RD
 City SAINT PAUL State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 3M Occupation (for Individual) ENGINEER, BUSINESS DEVELOPMEN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2021
Transaction ID : AF1CAD3A29FC04723A82
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1379 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCLEAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9423 HARALSON RD
 City SAINT PAUL State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 3M Occupation (for Individual) ENGINEER, BUSINESS DEVELOPMEI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A32CDDC53116A4630A94
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCLEAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9423 HARALSON RD
 City SAINT PAUL State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 3M Occupation (for Individual) ENGINEER, BUSINESS DEVELOPME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A0173E2EFE726488B8BA
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCLEAN, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9423 HARALSON RD
 City SAINT PAUL State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 3M Occupation (for Individual) ENGINEER, BUSINESS DEVELOPME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A362794E55FB140CC9B8
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1380 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCLELLEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4925 WEATHERSTONE LANE SE
 City GRAND RAPIDS State MI Zip Code 49508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRADFORD WHITE CORPORATION Occupation (for Individual) SENIOR MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 10 / 2021**
Transaction ID : AB49CE4501A854A78A0F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCLELLEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4925 WEATHERSTONE LANE SE
 City GRAND RAPIDS State MI Zip Code 49508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRADFORD WHITE CORPORATION Occupation (for Individual) SENIOR MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : A8AD6668E70C244B5922
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCLELLEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4925 WEATHERSTONE LANE SE
 City GRAND RAPIDS State MI Zip Code 49508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRADFORD WHITE CORPORATION Occupation (for Individual) SENIOR MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : A6D0212193AE540F9ACE
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1381 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCLELLEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4925 WEATHERSTONE LANE SE
 City GRAND RAPIDS State MI Zip Code 49508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRADFORD WHITE CORPORATION Occupation (for Individual) SENIOR MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A571DDA34F95640F1B71
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCLUCAS, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 CALLE AMANECER #230
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARITABLE TRUST ADMINISTRATION Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A069F3A85726C492ABF5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCLUCAS, CHUCK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 903 CALLE AMANECER #230
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARITABLE TRUST ADMINISTRATION Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A20A8D90E984D4670B5B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

200.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1382 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCMILLAN, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9252 ESTATE COVE CIRCLE
 City RIVERVIEW State FL Zip Code 33578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A447BB930942A4C46958
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MCMILLAN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3240 WEST BRITTON RD 103
 City OKLAHOMA CITY State OK Zip Code 73120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCMILLAN AND ASSOCIATES Occupation (for Individual) PARALEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A15689D518DBE4FA6877
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MCMILLAN, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3240 WEST BRITTON RD 103
 City OKLAHOMA CITY State OK Zip Code 73120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCMILLAN AND ASSOCIATES Occupation (for Individual) PARALEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AD490054911B94276AE2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1383 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCNAIR, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 WHITEHEAD RD EX
 City EWING State PA Zip Code 08628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **04 / 13 / 2021**
Transaction ID : A5FE113348C8B4845866
 Amount of Each Receipt this Period **65.00**
 Memo Item

B. MCNAIR, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 WHITEHEAD RD EX
 City EWING State PA Zip Code 08628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **05 / 13 / 2021**
Transaction ID : A294153599815426093D
 Amount of Each Receipt this Period **65.00**
 Memo Item

C. MCNAIR, JACQUELYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 WHITEHEAD RD EX
 City EWING State PA Zip Code 08628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 13 / 2021**
Transaction ID : AE8718AD77CC84E7C9F2
 Amount of Each Receipt this Period **65.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **195.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1384 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCNALLY, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 698
 City RANCHO SANTA FE State CA Zip Code 92067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ANTIQUARIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A82C0F612BE4146A8937
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MCNALLY, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 698
 City RANCHO SANTA FE State CA Zip Code 92067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ANTIQUARIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : AF38F3FA68F36420CB85
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MCNEIL, LOWERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 913 BLUEBONNET
 City KERRVILLE State TX Zip Code 78028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : AA72C215ECCF345B3890
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1385 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCNEIL, LOWERY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 913 BLUEBONNET
 City KERRVILLE State TX Zip Code 78028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 21 / 2021**
Transaction ID : A785AB64771E54C36B2B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MEADOW, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 VALLEY ST
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : A137D13C7066A48E9AE8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MEADOW, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 713 VALLEY ST
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : ADB1A1B566F12480598F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1386 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEADOWS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4161 VEGA LOOP
 City SHINGLE SPRINGS State CA Zip Code 95682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY DENTAL PLAN Occupation (for Individual) SENIOR MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AC02DF6A7C8284DBD904
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MEADOWS, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42621 SPINKS FERRY RD
 City LEESBURG State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : ABE67D022940846E186C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MEADOWS, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9494 HIGH MEADOW DR.
 City SOUTH JORDAN State UT Zip Code 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEADOWS PAINTING Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A3276BCB053D14898B5C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1387 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEADOWS, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9494 HIGH MEADOW DR.
 City SOUTH JORDAN State UT Zip Code 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEADOWS PAINTING Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A16A15314BE6D4780899
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MEARNS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4011 CHEROKEE COURT
 City GRANBURY State TX Zip Code 76048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A5B5DD0B688B94CFEA11
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672
 City EDWARDSVILLE State IL Zip Code 62025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 01 / 22 / 2021
Transaction ID : ABCFA303BF7C44F868F0
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1388 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2021

Transaction ID : A33608A0AA3204696A99

Amount of Each Receipt this Period
50.00

Memo Item

B. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2021

Transaction ID : AF91F4885FB4B42E2A67

Amount of Each Receipt this Period
35.00

Memo Item

C. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2021

Transaction ID : A51A0D66DF9DE42DCA29

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1389 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 345.00

Date of Receipt
 02 / 11 / 2021
Transaction ID : ABD4DFED4A05141E2B23

Amount of Each Receipt this Period
 25.00

Memo Item

B. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 02 / 13 / 2021
Transaction ID : A50986616C5A44553AE6

Amount of Each Receipt this Period
 75.00

Memo Item

C. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 470.00

Date of Receipt
 02 / 20 / 2021
Transaction ID : A28F638E647AB420E933

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1390 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2021

Transaction ID : A89A4008140E841F2B25

Amount of Each Receipt this Period
35.00

Memo Item

B. MEFFORD, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

Transaction ID : AD680B8FA03944F40AE7

Amount of Each Receipt this Period
50.00

Memo Item

C. MEFFORD, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

Transaction ID : A62B2AA248BCD4EB6937

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1391 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672
 City EDWARDSVILLE State IL Zip Code 62025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2021
Transaction ID : ABBFF50F39961429996A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672
 City EDWARDSVILLE State IL Zip Code 62025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2021
Transaction ID : A1BCEED4C748947BFB54
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672
 City EDWARDSVILLE State IL Zip Code 62025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : AF1E5D30BBE1341B49CF
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1392 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2021

Transaction ID : A1061781C3B8D48BA831

Amount of Each Receipt this Period
50.00

Memo Item

B. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021

Transaction ID : A42E43A32D9C941DCB24

Amount of Each Receipt this Period
35.00

Memo Item

C. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672

City EDWARDSVILLE	State IL	Zip Code 62025
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
885.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021

Transaction ID : A3EE79A47569C4297B72

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1393 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MEFFORD, DEAN, , ,

Mailing Address **PO BOX 672**

City **EDWARDSVILLE** State **IL** Zip Code **62025**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **885.00**

Date of Receipt
03 / 30 / 2021

Transaction ID : ABC29F9C1D83D479E9AB

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MEFFORD, DEAN, , ,

Mailing Address **PO BOX 672**

City **EDWARDSVILLE** State **IL** Zip Code **62025**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt
04 / 06 / 2021

Transaction ID : A891288FDE15548668ED

Amount of Each Receipt this Period
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MEFFORD, DEAN, , ,

Mailing Address **PO BOX 672**

City **EDWARDSVILLE** State **IL** Zip Code **62025**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **935.00**

Date of Receipt
04 / 11 / 2021

Transaction ID : A6CB12D1E30EE49A388F

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **85.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1394 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672
 City EDWARDSVILLE State IL Zip Code 62025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : A4A4C918429C247289A3
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. MEFFORD, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 672
 City EDWARDSVILLE State IL Zip Code 62025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1060.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2021
Transaction ID : AA05ABBF4F76E4E6DB47
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4721 RD 18
 City LAGRANGE State WY Zip Code 82221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF WYOMING Occupation (for Individual) STATE TREASURER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A565587A80D5D4258B99
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1395 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEIER, CURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4721 RD 18

City LAGRANGE	State WY	Zip Code 82221
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATE OF WYOMING	Occupation (for Individual) STATE TREASURER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 15 / 2021
Transaction ID : AD8EC22F2024640A69F6

Amount of Each Receipt this Period
 50.00

Memo Item

B. MELBY, MARY JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 RIM RD

City EL PASO	State TX	Zip Code 79902
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 16 / 2021
Transaction ID : A7A085D40E231469D9A2

Amount of Each Receipt this Period
 100.00

Memo Item

C. MELBY, MARY JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 RIM RD

City EL PASO	State TX	Zip Code 79902
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 16 / 2021
Transaction ID : A6F8C19C8A9804659874

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1396 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MELBY, MARY JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 RIM RD
 City EL PASO State TX Zip Code 79902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A8C13197D88B647759FA
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MELBY, MARY JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 RIM RD
 City EL PASO State TX Zip Code 79902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A05F76214CC3C419DA08
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MENDEZ, JOSUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14510 SW 35TH STREET
 City HOLLYWOOD State FL Zip Code 33027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AC53F2C6C46B74A6984E
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1397 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MENVILLE, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 APRIL WATERS DR W
 City MONTGOMERY State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A6F8746530989405D81B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MENVILLE, BETTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 APRIL WATERS DR W
 City MONTGOMERY State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A1856388BD6A44956B76
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MEOUCHY, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10336 ALMAYO AVE UNIT 401
 City LOS ANGELES State CA Zip Code 90064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A575BBDC9112B4F9D976
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

135.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1398 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MERCER, DOROTHY, , ,

Mailing Address 404 N YOUNG ST.

City FOLLETT	State TX	Zip Code 79034
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021

Transaction ID : AB4DFA24F50CB4C79BA7

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MERCER, DOROTHY, , ,

Mailing Address 404 N YOUNG ST.

City FOLLETT	State TX	Zip Code 79034
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021

Transaction ID : AE93805E95BD84967AFC

Amount of Each Receipt this Period
10.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MERCER, DOROTHY, , ,

Mailing Address 404 N YOUNG ST.

City FOLLETT	State TX	Zip Code 79034
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021

Transaction ID : AFCE1E990B5F4E5EB0F

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1399 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MERCER, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 966 SWEETWOOD COURT
 City ORANGE PARK State FL Zip Code 32065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACOUSTI ENGINEERING COMPANY OF FLORIDA Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A7AF56498F45948F4A9E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MERCER, LYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 966 SWEETWOOD COURT
 City ORANGE PARK State FL Zip Code 32065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACOUSTI ENGINEERING COMPANY OF FLORIDA Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A27845AAA00B84D4B96E
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MERCIER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 CROOKED CREEK LN
 City NASHVILLE State NC Zip Code 27856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A2EDC6D5B38014D4C939
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1400 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MERCIER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2641 CROOKED CREEK LN
 City NASHVILLE State NC Zip Code 27856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A78BEC159509F4C23A67
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MEREDITH, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 COUNTY ROAD C E
 City SAINT PAUL State MN Zip Code 55109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOSTON SCIENTIFIC Occupation (for Individual) MARKETING
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A6208EBDFA88147E5830
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MEREDITH, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 COUNTY ROAD C E
 City SAINT PAUL State MN Zip Code 55109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOSTON SCIENTIFIC Occupation (for Individual) MARKETING
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A4473E2F89B444572B74
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1401 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MERRITT, JOHN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 CLUB DR #310
 City LAWRENCEVILLE State GA Zip Code 30044-8905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A506AB20B2C554C5386D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MERRITT, JOHN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 CLUB DR #310
 City LAWRENCEVILLE State GA Zip Code 30044-8905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A19E63B13E9864913BA4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. METELSKY, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 92 HENRY ST
 City BURLINGTON State CT Zip Code 06013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DATA MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A150D276388174682B16
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1402 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. METZGER, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32055 CAMINO NUMEZ
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 04 / 12 / 2021
Transaction ID : A50522F6878B64077949
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. METZGER, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32055 CAMINO NUMEZ
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 04 / 26 / 2021
Transaction ID : AF9DE53A34299493283F
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. METZGER, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32055 CAMINO NUMEZ
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 05 / 12 / 2021
Transaction ID : ACC7D636DD93D4F7B923
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1403 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. METZGER, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32055 CAMINO NUMEZ
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A11BABC9C589B41DEA18
 Amount of Each Receipt this Period 5.00
 Memo Item

B. METZGER, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32055 CAMINO NUMEZ
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A236854B59BBC4C9BBBD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. METZGER, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32055 CAMINO NUMEZ
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AC5E7F12298C0455BA82
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1404 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEUNIER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 WOLF SWAMP ROAD
 City LONGMEADOW State MA Zip Code 01106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 26 / 2021**
Transaction ID : A1D30F251925444A3A78
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MEUNIER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 WOLF SWAMP ROAD
 City LONGMEADOW State MA Zip Code 01106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : AB0AB8318D2D54FDBAB6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MEYER, REX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17326 HARDING LANE
 City LAKEVILLE State MN Zip Code 55044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AECOM Occupation (for Individual) CIVIL ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : AE9A3165B72034B56908
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1405 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MICHALAK, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 487 STONYHILL RD
 City MORRISVILLE State PA Zip Code 19067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : A09EEF79516EB43EF80A
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MICHALAK, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 487 STONYHILL RD
 City MORRISVILLE State PA Zip Code 19067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2021
Transaction ID : A7DF31F33AFC84DD18C6
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MICHALAK, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 487 STONYHILL RD
 City MORRISVILLE State PA Zip Code 19067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AE8F43E65D4F943FBAC6
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1406 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MICHALAK, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 487 STONYHILL RD
 City MORRISVILLE State PA Zip Code 19067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AD8F36D8179CA411A931
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MICHIELS, YVES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9301 FREEPORT DRIVE
 City DENTON State TX Zip Code 76207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2021
Transaction ID : A24788881AEF341A0AD3
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MICHIELS, YVES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9301 FREEPORT DRIVE
 City DENTON State TX Zip Code 76207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 06 / 2021
Transaction ID : A97EB9FC99B6448DE8CA
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1407 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDDLESWORTH, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11288 E 200 N

City GREENTOWN	State IN	Zip Code 46936
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EASTERN HOWARD SCHOOL CORO	Occupation (for Individual) SPECIAL NEEDS BUS DRIVER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : AEC498BAEBABE47F7AA:

Amount of Each Receipt this Period
50.00

Memo Item

B. MIDDLESWORTH, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11288 E 200 N

City GREENTOWN	State IN	Zip Code 46936
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EASTERN HOWARD SCHOOL CORO	Occupation (for Individual) SPECIAL NEEDS BUS DRIVER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : AB41F9A76C4FD46048B0

Amount of Each Receipt this Period
50.00

Memo Item

C. MIDDLETON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4611 MONUMENT POINT DR.

City JACKSONVILLE	State FL	Zip Code 32225
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2021

Transaction ID : ABA94A5DB89C24E1C81B

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1408 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDDLETON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4611 MONUMENT POINT DR.
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **02 / 17 / 2021**
Transaction ID : A3EE08206A81B4235A7D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MIDDLETON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4611 MONUMENT POINT DR.
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : A6C0E71B5FD504A0C87C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MIDDLETON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4611 MONUMENT POINT DR.
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **03 / 16 / 2021**
Transaction ID : A636B03E9CCB749A887A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1409 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDDLETON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4611 MONUMENT POINT DR.

City JACKSONVILLE	State FL	Zip Code 32225
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2021

Transaction ID : A241D04A9CC4C41B086B

Amount of Each Receipt this Period
35.00

Memo Item

B. MIDDLETON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4611 MONUMENT POINT DR.

City JACKSONVILLE	State FL	Zip Code 32225
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2021

Transaction ID : A67DBB438488644F3930

Amount of Each Receipt this Period
50.00

Memo Item

C. MIDDLETON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4611 MONUMENT POINT DR.

City JACKSONVILLE	State FL	Zip Code 32225
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2021

Transaction ID : A7EEE095304F94F26A53

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1410 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDDLETON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4611 MONUMENT POINT DR.
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : A576E5369776F4C9896F
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MIDDLETON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4611 MONUMENT POINT DR.
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A27129F2333884B2081F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MIDDLETON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4611 MONUMENT POINT DR.
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A9FAADFA3B41E4D3BA8E
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1411 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDDLETON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4611 MONUMENT POINT DR.
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : AA2F90F3891C146D199A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MIDDLETON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4969 TWIN BRANCHES WAY
 City DUNWOODY State GA Zip Code 30338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : A09CCAE3A149B45A69F9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MIDDLETON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4969 TWIN BRANCHES WAY
 City DUNWOODY State GA Zip Code 30338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : A42C727811E8040428C7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1412 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B

City DESTIN	State FL	Zip Code 32541
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2021
Transaction ID : AA7E8597F323046098F9

Amount of Each Receipt this Period
 35.00

Memo Item

B. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B

City DESTIN	State FL	Zip Code 32541
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2021
Transaction ID : A1764C8B1E1D8460CAA3

Amount of Each Receipt this Period
 100.00

Memo Item

C. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B

City DESTIN	State FL	Zip Code 32541
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2021
Transaction ID : A12AE6B552C9F4E02879

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1413 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2021
Transaction ID : A95BA8E70AF3E4EE59E0
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2021
Transaction ID : AFD25B073E85E4EAB96A
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : AE9D350B3EEA04A83B87
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1414 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 03 / 18 / 2021
Transaction ID : A91E55706EBF246019C5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 03 / 23 / 2021
Transaction ID : A641FFEB271874611A38
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A6829BEFDC2D74B5C88E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1415 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt **04 / 01 / 2021**
Transaction ID : A97C0D2293188473E833
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : AAFE71411D07546EC864
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A60C8D51D610B459CAC5
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1416 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : AD76435D846D049058F2
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 940.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : AA34D74FFF28841BD81F
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 990.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A27575521FB34438DAD6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1417 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDKIFF, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 HARBOR BV 1-B

City DESTIN	State FL	Zip Code 32541
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1015.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : AF7F0A9B29D484B23949

Amount of Each Receipt this Period
25.00

Memo Item

B. MIDKIFF, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 HARBOR BV 1-B

City DESTIN	State FL	Zip Code 32541
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A33D89D332EE14F208C7

Amount of Each Receipt this Period
35.00

Memo Item

C. MIDKIFF, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 HARBOR BV 1-B

City DESTIN	State FL	Zip Code 32541
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2021

Transaction ID : AFA87762760604534969

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1418 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1200.00

Date of Receipt 06 / 18 / 2021
 Transaction ID : ACEFC145CC98C471CBA2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1225.00

Date of Receipt 06 / 23 / 2021
 Transaction ID : A1A3DD7D76CF74D72BBA
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MIDKIFF, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 HARBOR BV 1-B
 City DESTIN State FL Zip Code 32541
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1260.00

Date of Receipt 06 / 24 / 2021
 Transaction ID : AA51AD5D5C8F14673A84
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1419 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIHOLOVICH, LISS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 143
 City ARDARA State PA Zip Code 15615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DUNBAR ARMORED Occupation (for Individual) ARMED GUARD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AB035D0A1EDB3466E851
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MILES, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2613 MERIDIAN DR
 City ROBBINSDALE State MN Zip Code 55422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MN UMC Occupation (for Individual) ADMIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2021
Transaction ID : AE6E568B8B03B4558865
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MILES, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2613 MERIDIAN DR
 City ROBBINSDALE State MN Zip Code 55422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MN UMC Occupation (for Individual) ADMIN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A1D61138761834718B8B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1420 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MILLER, DELOIS, , ,

Mailing Address 722 HIGHLAND LAKES BLVD.

City ANNISTON	State AL	Zip Code 36207
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021

Transaction ID : A90E740B41F3C40E7B8F

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MILLER, DELOIS, , ,

Mailing Address 722 HIGHLAND LAKES BLVD.

City ANNISTON	State AL	Zip Code 36207
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021

Transaction ID : AF8293BDCA8B345F8A88

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MILLER, DURANDO, , , III

Mailing Address 7708 PRETTYMAN CIRCLE

City EXMORE	State VA	Zip Code 23350
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021

Transaction ID : A92A1869CE7354A86914

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1421 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MILLER, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1511 UPLAND DR.
 City SILVER SPRING State MD Zip Code 20905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 15 / 2021
Transaction ID : A5E207110871746149F0
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MILLER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 JOSHUA DRIVE
 City MESQUITE State NV Zip Code 89027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 01 / 21 / 2021
Transaction ID : A83387FABFFC34CEEB01
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. MILLER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 JOSHUA DRIVE
 City MESQUITE State NV Zip Code 89027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 02 / 21 / 2021
Transaction ID : A1A12301C627743DE893
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1422 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MILLER, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 880 JOSHUA DRIVE

City MESQUITE	State NV	Zip Code 89027
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2021

Transaction ID : AA0356C8E95A54268AE4

Amount of Each Receipt this Period
250.00

Memo Item

B. MILLER, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 880 JOSHUA DRIVE

City MESQUITE	State NV	Zip Code 89027
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2021

Transaction ID : A0915D200F4FF4CC4BEB

Amount of Each Receipt this Period
250.00

Memo Item

C. MILLER, JANET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 880 JOSHUA DRIVE

City MESQUITE	State NV	Zip Code 89027
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2021

Transaction ID : AF41278D859ED447B881

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1423 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MILLER, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 JOSHUA DRIVE
 City MESQUITE State NV Zip Code 89027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A2AC854BCD88546CDA07
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MILLER, JEROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6007 ECKLESON ST 87
 City LAKEWOOD State CA Zip Code 90713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A7F0AABE6FAD64356BA4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MILLING, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14517 SW ELSINORE LN
 City HILLSBORO State OR Zip Code 97123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OREGON BERRY PACKING Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A3982F380BAB74157A0E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1424 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MILLING, LARS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14517 SW ELSINORE LN
 City HILLSBORO State OR Zip Code 97123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OREGON BERRY PACKING Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A9BEBD800B74B4A58811
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MILONE, FILIPPO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1608 ABBEYWOOD DRIVE
 City MOBILE State AL Zip Code 36695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AD9F000228DF640DEA1D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MILONE, FILIPPO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1608 ABBEYWOOD DRIVE
 City MOBILE State AL Zip Code 36695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AE96494845705417FA7E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1425 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MINDERHOUT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 OGLESBY AVE

City BIRMINGHAM	State AL	Zip Code 35209
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2021

Transaction ID : AA499FAB6171C46C0979

Amount of Each Receipt this Period
25.00

Memo Item

B. MINDERHOUT, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 OGLESBY AVE

City BIRMINGHAM	State AL	Zip Code 35209
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2021

Transaction ID : A87B41014374240E88DD

Amount of Each Receipt this Period
5.00

Memo Item

C. MINKES, JULES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11769 S. W. 72ND PLACE

City MIAMI	State FL	Zip Code 33156
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PALMETTO BAY MEDICAL CENTER	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2021

Transaction ID : AB271D703E1004DF8A08

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1426 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MINKES, JULES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11769 S. W. 72ND PLACE

City MIAMI	State FL	Zip Code 33156
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PALMETTO BAY MEDICAL CENTER	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2021

Transaction ID : AB96920FC455B4CA6AF7

Amount of Each Receipt this Period
100.00

Memo Item

B. MINKES, JULES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11769 S. W. 72ND PLACE

City MIAMI	State FL	Zip Code 33156
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PALMETTO BAY MEDICAL CENTER	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2021

Transaction ID : A5AD18AE2BE7E41E9A78

Amount of Each Receipt this Period
100.00

Memo Item

C. MINKES, JULES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11769 S. W. 72ND PLACE

City MIAMI	State FL	Zip Code 33156
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PALMETTO BAY MEDICAL CENTER	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2021

Transaction ID : A6E9B6AD5980A44138DD

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1427 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MINTO, ERIK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 NORTH BUTLER STREET
 City MADISON State WI Zip Code 53703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A7F48C509E9BE40439CA
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MINTON, RUTH, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 W POLK AVE
 City LOVINGTON State NM Zip Code 88260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A3C44FE8EE34D4626897
 Amount of Each Receipt this Period 300.00
 Memo Item

C. MIRELES, ANTONIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20607 HIGHLAND LAKE LOOP
 City LAGO VISTA State TX Zip Code 78645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A659D5CDFE39A4BE3AEE
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1428 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIRELES, ANTONIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP

City LAGO VISTA	State TX	Zip Code 78645
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

Transaction ID : A161137BCEFB9473BAC6

Amount of Each Receipt this Period
55.00

Memo Item

B. MIRELES, ANTONIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20607 HIGHLAND LAKE LOOP

City LAGO VISTA	State TX	Zip Code 78645
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2021

Transaction ID : A30B5E2763EEE4C17AA7

Amount of Each Receipt this Period
50.00

Memo Item

C. MIRSKY, CYNTHIA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25331 DERBYHILL DRIVE

City LAGUNA HILLS	State CA	Zip Code 92653
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2021

Transaction ID : A6806BD0E8508435B824

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	605.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1429 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MIRSKY, CYNTHIA, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25331 DERBYHILL DRIVE
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **06 / 11 / 2021**
Transaction ID : AA3E1B95ED1B14F008AF
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. MISIUKOWIEC, LEONIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 BARNESON AVE APT A
 City SAN MATEO State CA Zip Code 94402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A3E5CAA97033944C8B3A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt **03 / 20 / 2021**
Transaction ID : A6AFD206709ED4800B85
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1575.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1430 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A41C1FD9E8F664B318E5
 Amount of Each Receipt this Period 5.00
 Memo Item

B. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A95882A917C6543089F1
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021
Transaction ID : ADEE76ED684884B53913
 Amount of Each Receipt this Period 13.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	53.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1431 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt 04 / 13 / 2021
Transaction ID : AAF7D4780040A4DC2B84
 Amount of Each Receipt this Period 5.00
 Memo Item

B. MISKA, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 THIRD
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.00

Date of Receipt 04 / 20 / 2021
Transaction ID : A17DAE0AEF7284D9BAE4
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MITCHEL, BERTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8557 CENTRAL AVE.
 City ORANGEVALE State CA Zip Code 95662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF CALIFORNIA Occupation (for Individual) CAREGIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A05DDAF686CF047AFB2F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1432 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MITCHEL, BERTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8557 CENTRAL AVE.
 City ORANGEVALE State CA Zip Code 95662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF CALIFORNIA Occupation (for Individual) CAREGIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AC323A9AED06D430EBE1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MITCHELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4127 BEECHWOOD DR NW
 City ATLANTA State GA Zip Code 30327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLIED CERAMICS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 15 / 2021
Transaction ID : A215823A1889F40A7A81
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MITCHELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 W ASH ST
 City SAN DIEGO State CA Zip Code 92101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A0425CA52C30449758E0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1433 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MITCHELL, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 W ASH ST
 City SAN DIEGO State CA Zip Code 92101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A9B2CCBE23FB9450A887
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MITCHELL, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16921 BOLERO LANE
 City HUNTINGTON BEACH State CA Zip Code 92649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 16 / 2021
Transaction ID : AA799C8CD35E54AD38CF
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MITCHELL, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16921 BOLERO LANE
 City HUNTINGTON BEACH State CA Zip Code 92649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 14 / 2021
Transaction ID : A36AA29A164D44391AF5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1434 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MITCHELL, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16921 BOLERO LANE
 City HUNTINGTON BEACH State CA Zip Code 92649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **02 / 16 / 2021**
Transaction ID : A5B5471D1DB8D48ACA2C
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MITCHELL, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16921 BOLERO LANE
 City HUNTINGTON BEACH State CA Zip Code 92649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **03 / 14 / 2021**
Transaction ID : ABD05317D3C5941D7BCF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MITCHELTREE, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 CANDY CIR
 City WINTERVILLE State GA Zip Code 30683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 05 / 2021**
Transaction ID : A6C45DA6F825E4E75892
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1435 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MITCHELTREE, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 CANDY CIR
 City WINTERVILLE State GA Zip Code 30683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 04 / 2021**
Transaction ID : AFEC7801ABFA04769962
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MITCHELTREE, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 CANDY CIR
 City WINTERVILLE State GA Zip Code 30683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 04 / 2021**
Transaction ID : A81B9CD58C3B641F3AF1
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MITCHELTREE, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 CANDY CIR
 City WINTERVILLE State GA Zip Code 30683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 04 / 2021**
Transaction ID : A3A708F2F974842C5A6B
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1436 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MITCHELTREE, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 CANDY CIR
 City WINTERVILLE State GA Zip Code 30683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : A88BAA46730B94A1AB80
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MITCHELTREE, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 166 CANDY CIR
 City WINTERVILLE State GA Zip Code 30683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AA91867AF25F2487F944
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MOBLEY, ANNA, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3528 E. SHEFFIELD WAY
 City SPRINGFIELD State MO Zip Code 65802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A8DFCAE035F4344DCBFE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1437 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOBLEY, ANNA, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3528 E. SHEFFIELD WAY
 City SPRINGFIELD State MO Zip Code 65802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : ABC04868F048F40A785B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MOCCIO, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2915 15TH ST 104
 City DELRAY BEACH State FL Zip Code 33445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAPTIST HEALTH Occupation (for Individual) MEDICAL BILLER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A2FD04351329F4715BE6
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MODESITT, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4267 RIVERBIRCH RUN
 City ZIONSVILLE State IN Zip Code 46077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : A2F386A4DF9F84F718A0
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1438 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MODLIN, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 S 328TH ST E601
 City FEDERAL WAY State WA Zip Code 98003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 04 / 19 / 2021
Transaction ID : A91AB04D4AC354B908C9
 Amount of Each Receipt this Period: 35.00
 Memo Item

B. MODLIN, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 S 328TH ST E601
 City FEDERAL WAY State WA Zip Code 98003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 04 / 20 / 2021
Transaction ID : A424857040805475EB78
 Amount of Each Receipt this Period: 75.00
 Memo Item

C. MODLIN, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 S 328TH ST E601
 City FEDERAL WAY State WA Zip Code 98003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 05 / 08 / 2021
Transaction ID : AAA0FC2CC262F491F991
 Amount of Each Receipt this Period: 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1439 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MODLIN, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 S 328TH ST E601
 City FEDERAL WAY State WA Zip Code 98003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A78E3C1BE8BB34A7A93D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MODLIN, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 S 328TH ST E601
 City FEDERAL WAY State WA Zip Code 98003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 21 / 2021
Transaction ID : A09922B238DAB4408B8B
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MODLIN, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 S 328TH ST E601
 City FEDERAL WAY State WA Zip Code 98003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AAB25F7C051874180AF6
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1440 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MODLIN, PATRICIA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1524 S 328TH ST E601
 City FEDERAL WAY State WA Zip Code 98003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AF49B3142577E4D2D935
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MOE, SEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1208 WESSMITH WAY
 City MADERA State CA Zip Code 93638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVID FRISBY ALLSTATE Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AC124A76B7A4B4EAA8DC
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MOGFORD, DEBORAH, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 913 N MAIN ST, APT 608
 City ROCKFORD State IL Zip Code 61103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 17 / 2021
Transaction ID : AD43063E59F674A75952
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1441 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOHLER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11921 MACKEY ST.
 City OVERLAND PARK State KS Zip Code 66213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A9CED823422D54A81B9F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MOHLER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11921 MACKEY ST.
 City OVERLAND PARK State KS Zip Code 66213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : AA84ED706C28B4C1EB02
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MOLINA, DAVID, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13056 WALLICH WAY
 City GERMANTOWN State MD Zip Code 20874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : AA7CF063388824039A1D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1442 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOLINA, DAVID, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13056 WALLICH WAY

City GERMANTOWN	State MD	Zip Code 20874
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2021

Transaction ID : A24B0F0D1C540482E873

Amount of Each Receipt this Period
50.00

Memo Item

B. MOLINA, DAVID, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13056 WALLICH WAY

City GERMANTOWN	State MD	Zip Code 20874
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2021

Transaction ID : A8864FD60111A4986BC3

Amount of Each Receipt this Period
25.00

Memo Item

C. MOLINE, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11508 CEDAR GROVE ST

City GIG HARBOR	State WA	Zip Code 98329
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACOBS TECHNOLOGY	Occupation (for Individual) RRWKR
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2021

Transaction ID : AEB0F376D59384F96B7E

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1443 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOLINE, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11508 CEDAR GROVE ST
 City GIG HARBOR State WA Zip Code 98329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JACOBS TECHNOLOGY Occupation (for Individual) RRWKR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A75693C22E6F94BDB9D1
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MOLLOY, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 N RIM RANCH PT
 City PAYSON State AZ Zip Code 85541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A3F343730638F4A2CBD4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MOLLOY, BRENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 N RIM RANCH PT
 City PAYSON State AZ Zip Code 85541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A5B198D803F9F445A838
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1444 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MONAHAN, CHRISTOPHER, , ,

Mailing Address 29325 SYPUS CT

City SUN CITY	State CA	Zip Code 92587
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DEVELOPER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021

Transaction ID : A1561A2B03DDF455F88E

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MONAHAN, CHRISTOPHER, , ,

Mailing Address 29325 SYPUS CT

City SUN CITY	State CA	Zip Code 92587
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DEVELOPER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021

Transaction ID : AB0D806E352C04EC59AC

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MONAHAN, CHRISTOPHER, , ,

Mailing Address 29325 SYPUS CT

City SUN CITY	State CA	Zip Code 92587
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DEVELOPER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
343.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021

Transaction ID : A7D3CBA791F704AA6BE5

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1445 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 28 / 2021
Transaction ID : ADE19581E5919486EB63
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 28 / 2021
Transaction ID : AF49D1C5559834482BED
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 21 / 2021
Transaction ID : A0A70DF92BFB6448185E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1446 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 03 / 29 / 2021
Transaction ID : ADCA9206428684C91B9C
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 30 / 2021
Transaction ID : AFC3FC20BADE345CD96C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 04 / 21 / 2021
Transaction ID : A9CF2C8E4BB604A89848
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1447 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AD1D7A0F38FFA42B892C
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A29E7256653B74031800
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MONGIELLO, MICHELE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 242 WALTHAM STREET
 City LEXINGTON State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPUTRITION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 05 / 21 / 2021
Transaction ID : AD7B0D4291B0E4FE6AF3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1448 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MONGIELLO, MICHELE, , ,

Mailing Address **242 WALTHAM STREET**

City LEXINGTON	State MA	Zip Code 02421
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPUTRITION	Occupation (for Individual) ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
515.00

Date of Receipt
05 / 29 / 2021

Transaction ID : A972216E2B06C4729863

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MONGIELLO, MICHELE, , ,

Mailing Address **242 WALTHAM STREET**

City LEXINGTON	State MA	Zip Code 02421
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPUTRITION	Occupation (for Individual) ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
05 / 30 / 2021

Transaction ID : AEF7B5A4225434123B90

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MONGIELLO, MICHELE, , ,

Mailing Address **242 WALTHAM STREET**

City LEXINGTON	State MA	Zip Code 02421
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPUTRITION	Occupation (for Individual) ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 21 / 2021

Transaction ID : A224F6F4FEF2048D98FD

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1449 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONGIELLO, MICHELE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 242 WALTHAM STREET

City LEXINGTON	State MA	Zip Code 02421
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPUTRITION	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : A50D83841D11E482A807

Amount of Each Receipt this Period
25.00

Memo Item

B. MONGIELLO, MICHELE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 242 WALTHAM STREET

City LEXINGTON	State MA	Zip Code 02421
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMPUTRITION	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : ABFAA24C669094723815

Amount of Each Receipt this Period
35.00

Memo Item

C. MONROE, RENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2712 DUNCAN STREET

City PAMPA	State TX	Zip Code 79065
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DR. RENE' MONROE METAPHYSICAL
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : A6B92725937CF4741A00

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1450 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONTANTI, VINCENT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2424N FEDERAL HWY.
SUITE311

City BOCA RATON State FL Zip Code 33431-7781

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) MONTANTI ADVISORY SERVICES INC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : AEF175B4A9CFC454EBCF

Amount of Each Receipt this Period 100.00

Memo Item

B. MONTANTI, VINCENT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2424N FEDERAL HWY.
SUITE311

City BOCA RATON State FL Zip Code 33431-7781

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) MONTANTI ADVISORY SERVICES INC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 02 / 2021
Transaction ID : A8B5A5B59A2454DB9A7D

Amount of Each Receipt this Period 100.00

Memo Item

C. MONTANTI, VINCENT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2424N FEDERAL HWY.
SUITE311

City BOCA RATON State FL Zip Code 33431-7781

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) MONTANTI ADVISORY SERVICES INC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2021
Transaction ID : ACE13D904B47F42CD952

Amount of Each Receipt this Period 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1451 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONTANTI, VINCENT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2424N FEDERAL HWY.
 SUITE311
 City BOCA RATON State FL Zip Code 33431-7781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MONTANTI ADVISORY SERVICES INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A8BE87DB4F81C4A4291D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MONTERO, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 HAYWARD AVE
 5U
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARSONS & WHITTEMORE, INC Occupation (for Individual) ASSISTANT TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 25 / 2021
Transaction ID : A02328F0C535D4389BA6
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MONTGOMERY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1488 KEY LANE
 City ABILENE State TX Zip Code 79602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST TEXAS RADIOLOGY GROUP Occupation (for Individual) MD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A3434DB06F0794C9DB6A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1452 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONTGOMERY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1488 KEY LANE
 City ABILENE State TX Zip Code 79602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST TEXAS RADIOLOGY GROUP Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A6BD5DE15F382431F8AD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 GLEN WEST DR
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A54B5A80DA6F343DA962
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 GLEN WEST DR
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A793C15C4B73E4A2ABE3
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1453 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 GLEN WEST DR
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A682B237FCD1549218F7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 GLEN WEST DR
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A387DCE2DF34E4454BDE
 Amount of Each Receipt this Period 10.00
 Memo Item

C. MONTIJO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 GLEN WEST DR
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CGS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A8D6AEE30C432418F952
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1454 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOORE, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3720 NE 925 RD
 City OSCEOLA State MO Zip Code 64776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : AD5A67FB94B714C958E1
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MOORE, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3720 NE 925 RD
 City OSCEOLA State MO Zip Code 64776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A9CFACD8B8EAB499397F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MOORE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CAPE COD AVE
 City BARNEGAT State NJ Zip Code 08005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A3098E69870D64A2E8FB
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1455 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOORE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CAPE COD AVE
 City BARNEGAT State NJ Zip Code 08005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : AD43F6B5B30B341609F2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MOORE, FRANK, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1659 SAVOY
 City MURFREESBORO State TN Zip Code 37130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A15DABCB32CE841E3B4B
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : AF5FE0583D4F648CD98F
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1456 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **03 / 30 / 2021**
Transaction ID : A38211B0C94DB47A7B7C
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : A6C004344BF724D5C998
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : A1AF1D721885E4C64960
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1457 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A76D7F2F2284C4BAC85E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A39D0FAE347D444F6BFD
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : A882BB7E3D4CB49E8A9D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1458 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A92F1D11E9C074592AC4
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A7AA1FC7484914CEFA5F
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MOORE, PATRICIA, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 ELMWOOD DR.
 City HACKETTSTOWN State NJ Zip Code 07840-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AB61D7742C858426BB0C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 85.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1459 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORA, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 773 VILLA LA PAZ DR
 City MESQUITE State NV Zip Code 89027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : A47A9E6E882ED42F2A2C
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MORALES, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 SUNNYSIDE DR
 City JACKSONVILLE State FL Zip Code 32207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 03 / 17 / 2021
Transaction ID : AD3EAC29B628A4A099DD
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MORALES, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 SUNNYSIDE DR
 City JACKSONVILLE State FL Zip Code 32207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 04 / 17 / 2021
Transaction ID : A9D8F4F19A7024B979B6
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1460 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORALES, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 SUNNYSIDE DR
 City JACKSONVILLE State FL Zip Code 32207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 17 / 2021
Transaction ID : ABA6E53F978344009B87
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MORALES, JORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 SUNNYSIDE DR
 City JACKSONVILLE State FL Zip Code 32207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ICS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A84F42919F960419A826
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MORALES, RAMIRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10431 LONE STAR PLACE
 City FORT LAUDERDALE State FL Zip Code 33328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : ADB72B6F1DBED4D58A12
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1461 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORALES, RAMIRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10431 LONE STAR PLACE
 City FORT LAUDERDALE State FL Zip Code 33328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A4C9F1451B92549AA9C5
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MORALES, RICARDO, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6950 PHILIPS HIGHWAY, SUITE 15
 City JACKSONVILLE State FL Zip Code 32216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORALES GROUP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 29 / 2021
Transaction ID : AE796AB8EA24A4AA7941
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MORALES, RICARDO, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6950 PHILIPS HIGHWAY, SUITE 15
 City JACKSONVILLE State FL Zip Code 32216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORALES GROUP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 29 / 2021
Transaction ID : A8291FB91FEA844D99B4
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1462 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORALES, RICARDO, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6950 PHILIPS HIGHWAY, SUITE 15

City JACKSONVILLE	State FL	Zip Code 32216
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MORALES GROUP	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : A19C8E0E0849C42E3AF9

Amount of Each Receipt this Period
100.00

Memo Item

B. MORALES, RICARDO, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6950 PHILIPS HIGHWAY, SUITE 15

City JACKSONVILLE	State FL	Zip Code 32216
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MORALES GROUP	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : AF358D3065C4C483F97E

Amount of Each Receipt this Period
100.00

Memo Item

C. MORGAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 342 ALEXANDER DRIVE

City TELFORD	State PA	Zip Code 18969
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HYDRO INSTRUMENTS	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : A0CD7AC9D312646D1910

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1463 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORGAN, ALAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 342 ALEXANDER DRIVE

City TELFORD	State PA	Zip Code 18969
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HYDRO INSTRUMENTS	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021

Transaction ID : A4C676C91CCE440E69E7

Amount of Each Receipt this Period
50.00

Memo Item

B. MORGAN, CURT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5118 MULBERRY GROVE

City KINGWOOD	State TX	Zip Code 77345
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021

Transaction ID : A801EF459826A44FDA32

Amount of Each Receipt this Period
35.00

Memo Item

C. MORGAN, HERBERT, N, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3450 N. VENICE ST

City ARLINGTON	State VA	Zip Code 22207
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021

Transaction ID : ABCC2D7F6BFB74381B28

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1464 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORGAN, HERBERT, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 N. VENICE ST
 City ARLINGTON State VA Zip Code 22207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A6BA5D3E43EAD4323BBF
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MORGAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 COSTA BELLA COVE
 7801 NORTH LAMAR STE F9 78752
 City AUSTIN State TX Zip Code 78734-2660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE RTEAL ESTATE BUSINESS SCHOOL Occupation (for Individual) CO-OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 15 / 2021**
Transaction ID : A5316903FC2EF4E5C8C6
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MORHOUSE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 440 BLACK POINT RD
 City TICONDEROGA State NY Zip Code 12883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : ACAF9987613104F5BB66
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1465 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORHOUSE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 440 BLACK POINT RD
 City TICONDEROGA State NY Zip Code 12883
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AB45F793986D74C3FABC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MORRISSETTE-OKON, RACHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 9532
 City LAGUNA BEACH State CA Zip Code 92652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A1EA07DE007184B4AB06
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MORRISSETTE-OKON, RACHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 9532
 City LAGUNA BEACH State CA Zip Code 92652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A631FBF744FA94123978
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1466 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRIS, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1027 BREEZY HILL LN.
 City ROCKWALL State TX Zip Code 75087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : AFF1E0250EAB84491A3E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MORRIS, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1027 BREEZY HILL LN.
 City ROCKWALL State TX Zip Code 75087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A38791FB4309D4120A62
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MORRIS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 WILLOWGATE DR
 City BONAIRE State GA Zip Code 31005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AF69DF3CADF8343F4925
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1467 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRISON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1238 AMBERWOOD CT
 City BELLBROOK State OH Zip Code 45305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : A3008C76B1EB34499958
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MORRISON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1238 AMBERWOOD CT
 City BELLBROOK State OH Zip Code 45305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A714866E65B77461BAB0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MORRISON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1238 AMBERWOOD CT
 City BELLBROOK State OH Zip Code 45305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : A7E097CD55822488AA77
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1468 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRISON, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6765 KYLE RIDGE
 City CANFIELD State OH Zip Code 44406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AE13DFBCFFC274FD2AA/
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MORRISON, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6765 KYLE RIDGE
 City CANFIELD State OH Zip Code 44406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A0D016B9198024ACFA60
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MORRIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2935 1ST LANE
 City VERO BEACH State FL Zip Code 32968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VERO DOCK Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : AF4F3849BEA0747ABA5F
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1469 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2021
Transaction ID : A1F13BBD1A24C41659E1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2021
Transaction ID : A26991CDBB92F4E2C9EB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A183F707ECEBA449BA3D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1470 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 12 / 2021
Transaction ID : A444E903B59AE4B62B00
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A00C74E0E3595412CB3F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2021
Transaction ID : A239190AC767B4688B7C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1471 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A57BF6F570B4644588BC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MORRISROE, BRENDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SIOUX DR
 City CANTON State MA Zip Code 02021-1253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A09A9F547B08145B1942
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MORRISS, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 WEST BROAD ST D
 City TEXARKANA State TX Zip Code 75501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A34829B2B112B4B02B7F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1472 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 03 / 09 / 2021
Transaction ID : A861158D0CE714672B48
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 03 / 18 / 2021
Transaction ID : A873C74BA0238414FAFE
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 305.00

Date of Receipt
 03 / 20 / 2021
Transaction ID : A577E8376BDA44658A03
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1473 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt **03 / 29 / 2021**
Transaction ID : A78507C64B0AD43C3BFF
 Amount of Each Receipt this Period 150.00
 Memo Item

B. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt **04 / 09 / 2021**
Transaction ID : A0FE994AA947F4DE5A01
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : AB788B8F0049043B4877
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1474 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt **04 / 20 / 2021**
Transaction ID : A001683C0E344410EAF3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt **05 / 09 / 2021**
Transaction ID : AD64F36824DA3449A839
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt **05 / 18 / 2021**
Transaction ID : A7CC8370E2E164162B74
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1475 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 655.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A5296D7FCA2964BD2929
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : AF9E6A5A7078A445B857
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A27EF2C453C724B18A65
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1476 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORRIS, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25587 LANE ST
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A7129C6DBD7DE4639960
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MORTON, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10468 PURDEY ROAD
 City EDEN PRAIRIE State MN Zip Code 55347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A04A1730E66D34AA3BBA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MORTON, JERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12164 N. ANNA CADE RD.
 City ROCKWALL State TX Zip Code 75087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A9F20578E7F7A44EBB48
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1477 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORTON, JERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12164 N. ANNA CADE RD.
 City ROCKWALL State TX Zip Code 75087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AD697A1627B0F4257BB6
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MORTON, WILLIAM, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 66
 City BOCA GRANDE State FL Zip Code 33921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A0E39F64A98AA4A3C91E
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. MORTON, WILLIAM, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 66
 City BOCA GRANDE State FL Zip Code 33921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A2FFF2E90A3064FD8B3F
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1478 OF 3012
(check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOSCHELLA, JOSEPH, V, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6582 LANDINGS CT
City BOCA RATON State FL Zip Code 33496
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AD63807171D094D2F96C
Amount of Each Receipt this Period 35.00
Memo Item

B. MOSELEY, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 411 UNIVERSITY ST 1200
City SEATTLE State WA Zip Code 98101
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 300.00

Date of Receipt 03 / 06 / 2021
Transaction ID : A34C4C28015F84B4C86E
Amount of Each Receipt this Period 100.00
Memo Item

C. MOSELEY, SUSAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 411 UNIVERSITY ST 1200
City SEATTLE State WA Zip Code 98101
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 400.00

Date of Receipt 04 / 06 / 2021
Transaction ID : AA4A7975974234B5EBAB
Amount of Each Receipt this Period 100.00
Memo Item

SUBTOTAL of Receipts This Page (optional) 235.00
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1479 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOSELEY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 UNIVERSITY ST
 1200
 City SEATTLE State WA Zip Code 98101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A574E1C7B55F3489D99E
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MOSELEY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 UNIVERSITY ST
 1200
 City SEATTLE State WA Zip Code 98101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : A1FB9F7D6C898474D840
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : AC5CD27E62FA148C392D
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1480 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A48535E11732D42E19A3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : ADEFA72757F2944C2CB05
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : ADFC4D2D6D904492FB6E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1481 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AE8A8B95389D643B7AEB
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MOSER, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 CEDAR LN
 City LINCOLNSHIRE State IL Zip Code 60069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APT RENTALS & FARM LAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 28 / 2021
Transaction ID : ADA6D105BF3884B60A84
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MOSER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 48283
 City BURIEN State WA Zip Code 98146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A7A4B63B985AB4D49A50
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1482 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOSER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 48283
 City BURDEN State WA Zip Code 98146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A0AE8F25942744DF4B20
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MOSIER, DIANE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6357 PONDEROSA ROAD
 City SHOW LOW State AZ Zip Code 85901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A3CC13BE9B2EF4D28B5A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MOSIER, DIANE, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6357 PONDEROSA ROAD
 City SHOW LOW State AZ Zip Code 85901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A0AA8894C40F343FB8FB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1483 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOSIER, DIANE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6357 PONDEROSA ROAD

City SHOW LOW	State AZ	Zip Code 85901
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A2A9CB07E13C54841A41

Amount of Each Receipt this Period
100.00

Memo Item

B. MOSIER, DIANE, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6357 PONDEROSA ROAD

City SHOW LOW	State AZ	Zip Code 85901
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2021

Transaction ID : AEC1AE137C614467C858

Amount of Each Receipt this Period
100.00

Memo Item

C. MOYER, YOLANDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20314 FLOWER GATE LANE

City YORBA LINDA	State CA	Zip Code 92886
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HAPPY FAMILY BRANDS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2021

Transaction ID : A980E9728520D4FE487D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1484 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOYER, YOLANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20314 FLOWER GATE LANE
 City YORBA LINDA State CA Zip Code 92886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAPPY FAMILY BRANDS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A70DDA0D8B2C44E01937
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MRIJAJ, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BRONX RIVER ROAD
 City YONKERS State NY Zip Code 10704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTY GOVERNMENT Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A8E136219062F4F01BC1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MRIJAJ, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BRONX RIVER ROAD
 City YONKERS State NY Zip Code 10704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COUNTY GOVERNMENT Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A0369496B655A4D1CB08
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1485 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUCCINO, VANESSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8522 TOWNE MANOR CT
 City ALEXANDRIA State VA Zip Code 22309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CACI Occupation (for Individual) INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 15 / 2021**
Transaction ID : A53A51009E42844ECA3C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MUCCINO, VANESSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8522 TOWNE MANOR CT
 City ALEXANDRIA State VA Zip Code 22309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CACI Occupation (for Individual) INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : A48DBD614AC8148E5BBD
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MUCCINO, VANESSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8522 TOWNE MANOR CT
 City ALEXANDRIA State VA Zip Code 22309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CACI Occupation (for Individual) INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : AC71E85A3DA48425F923
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1486 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUCCINO, VANESSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8522 TOWNE MANOR CT
 City ALEXANDRIA State VA Zip Code 22309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CACI Occupation (for Individual) INVESTIGATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AEE0C6097A08443438AD
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MUCK, CLEMENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 WATERFORD COVE DRIVE
 City CALERA State AL Zip Code 35040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SALES AND MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A4470208F4815428C820
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MUELLER, CASSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 ORCHARD STREET
 City TERRYVILLE State CT Zip Code 06786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRINITYHEALTH OF NEW ENGLAND ST. MARY' Occupation (for Individual) MRI TECHNOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AA0311CFCFFFD48D8950
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1487 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUELLER, CASSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 ORCHARD STREET
 City TERRYVILLE State CT Zip Code 06786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRINITYHEALTH OF NEW ENGLAND ST. MARY' Occupation (for Individual) MRI TECHNOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 08 / 2021**
Transaction ID : AF07E5942071E4B50BCE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MUGGLIN, DONALD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5958 HOLT MART RD
 City WILLET State NY Zip Code 13863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 30 / 2021**
Transaction ID : AD86FBB8270CA4C718F0
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MUGGLIN, DONALD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5958 HOLT MART RD
 City WILLET State NY Zip Code 13863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : AD6EDCBC22C114874976
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1488 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUGGLIN, DONALD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5958 HOLT MART RD
 City WILLET State NY Zip Code 13863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AC87E6B9101DB4F6486D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MUGGLIN, DONALD, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5958 HOLT MART RD
 City WILLET State NY Zip Code 13863
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AE4717E143ACB4852BE4
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 18 / 2021
Transaction ID : AA5F92AD2030A4A80B6E
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1489 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 17 / 2021**
Transaction ID : AF380E99C46EB40DDAA7
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 17 / 2021**
Transaction ID : A535EB0B7997948E58E4
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : ACFBA1BCA0BB04953AB4
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1490 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A4BFB4806824044EEACF
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : A1B5B225DECBA40D8A22
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **05 / 04 / 2021**
Transaction ID : AD6406BEADB894063923
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1491 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A8448DC60DD5B40D087E
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AD47B0C84E0834448B6D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MUHLHAUSER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7800 INDIAN HILL RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A6848A07DD2784B0BA3D
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1492 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **02 / 28 / 2021**
Transaction ID : A45C7713F59844E8B8C1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **03 / 13 / 2021**
Transaction ID : A6736ACC7CAAD43A688D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt **03 / 21 / 2021**
Transaction ID : AF4AA41BB6B8224621B36
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1493 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MULACEK, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15724 KOENIG LANE

City CONROE	State TX	Zip Code 77384
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2021

Transaction ID : ADF4933C082C4262B15

Amount of Each Receipt this Period
50.00

Memo Item

B. MULACEK, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15724 KOENIG LANE

City CONROE	State TX	Zip Code 77384
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2021

Transaction ID : A873A23F6927A4BFDA18

Amount of Each Receipt this Period
35.00

Memo Item

C. MULACEK, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15724 KOENIG LANE

City CONROE	State TX	Zip Code 77384
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2021

Transaction ID : A0BD0C11648884AA2ACE

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1494 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : AE3343FF2B4AC484FBDB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : A9DC1D567348947D6899
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **05 / 21 / 2021**
Transaction ID : A09E1BB400FEF4D68BE7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 1495 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **05 / 31 / 2021**
Transaction ID : AE97C8CC933DA40739B5
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : AA418989D23FB46A296E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt **06 / 21 / 2021**
Transaction ID : AA9CDCF64A54D4B0AB3C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1496 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MULACEK, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15724 KOENIG LANE
 City CONROE State TX Zip Code 77384
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A36666FF37D5B4795846
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MULLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1119 W. MARKET ST.
 City LEWISBURG State PA Zip Code 17837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A0780D490A16B4BE697D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MULLER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1119 W. MARKET ST.
 City LEWISBURG State PA Zip Code 17837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A3C1C476E72034070A13
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1497 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUMAW, TED, , , SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1231 W AVE A

City GARLAND	State TX	Zip Code 75040-6122
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GISD	Occupation (for Individual) SCHOOL BUS DRIVER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A9274780BF7344819A2B

Amount of Each Receipt this Period
35.00

Memo Item

B. MUMENTHALER, FREDERICK, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 OXFORD RD

City LANSDALE	State PA	Zip Code 19446
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A095B1BE16F274127A6B

Amount of Each Receipt this Period
50.00

Memo Item

C. MUMENTHALER, FREDERICK, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 OXFORD RD

City LANSDALE	State PA	Zip Code 19446
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A888A8B6D3C7B429591B

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1498 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUMME, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 127 S ROACH
 1503
 City JACKSON State MS Zip Code 39201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FOOTBALL COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A12BD03D1AF434F4B9A4
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MUNDY, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67B BRANDYWYNE E
 City BRIELLE State NJ Zip Code 08730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : A9E9CBDDA272246AEB9E
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. MUNDY, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67B BRANDYWYNE E
 City BRIELLE State NJ Zip Code 08730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A8A9EB442BFEB4F288A0
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1499 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUNRO, DIANE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6105 MILAM
 City MABLETON State GA Zip Code 30126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2021
Transaction ID : AEB4C80A164FD4A98928
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. MUNRO, DIANE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6105 MILAM
 City MABLETON State GA Zip Code 30126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A59415E86365C468D91F
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MUNRO, DIANE, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6105 MILAM
 City MABLETON State GA Zip Code 30126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A20B9B0F3D6AC4A999F0
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 1500 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURATORE, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 PACIFIC AVENUE #5
 City SAN FRANCISCO State CA Zip Code 94111-1957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A9182177144F14160AE5
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : ACB90F6A01A3E4315B66
 Amount of Each Receipt this Period
 40.00
 Memo Item

C. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : AA6152691C37747B0B8A
 Amount of Each Receipt this Period
 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1501 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 05 / 12 / 2021
Transaction ID : ADA6D0F18E1494FC0810
 Amount of Each Receipt this Period 40.00
 Memo Item

B. MURPHY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19951 COLLIER ST
 City WOODLAND HILLS State CA Zip Code 91364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 12 / 2021
Transaction ID : AF4ED2807EA8C47E78B2
 Amount of Each Receipt this Period 40.00
 Memo Item

C. MURPHY, CLARE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6231 VIRGINIA HILLS AVE
 City ALEXANDRIA State VA Zip Code 22310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A92531DB412DF4DB0BC8
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1502 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURPHY, CLARE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6231 VIRGINIA HILLS AVE
 City ALEXANDRIA State VA Zip Code 22310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AFECAE7E08D294DB5B10
 Amount of Each Receipt this Period 15.00
 Memo Item

B. MURPHY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11604 VANTAGE HILL ROAD 22B
 City RESTON State VA Zip Code 20190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2021
Transaction ID : A84F34AC6F5584775BE9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MURPHY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11604 VANTAGE HILL ROAD 22B
 City RESTON State VA Zip Code 20190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A220D956FAC3D49FCB21
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 115.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1503 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURPHY, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1253 NORTH BASIN LANE
 City SARASOTA State FL Zip Code 34242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 1 STOP MATERIAL HANDLING INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A839DA7A6E5664F08AE6
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. MURPHY, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 CHELSEA STREET
 City HAWTHORNE State NY Zip Code 10532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A68FB3DBE619541A19A9
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. MURRAY, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7948 CO. RD. 6
 City MERINO State CO Zip Code 80741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A2FE733F68C9E4705A0F
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1504 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

Transaction ID : AEFCE5273DBA84E0881A

Amount of Each Receipt this Period
25.00

Memo Item

B. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2021

Transaction ID : ABC082A243ED044B68B1

Amount of Each Receipt this Period
15.00

Memo Item

C. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2021

Transaction ID : A27F6DB145A86473DAD2

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1505 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2021
Transaction ID : ABC0410DC3C3E402692F
 Amount of Each Receipt this Period 5.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2021
Transaction ID : AB50F62C354B34F37992
 Amount of Each Receipt this Period 15.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2021
Transaction ID : AE9D61650C37E4F19B56
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1506 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **02 / 26 / 2021**
Transaction ID : A85FE0CA8F74A4ECD8CA
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : AD1672E64EA954E0FB43
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt **03 / 08 / 2021**
Transaction ID : A07546294DCF14788998
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1507 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A254FD7D6FF0940EDB7A
 Amount of Each Receipt this Period 15.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021
Transaction ID : ADFA2132492464B8AB05
 Amount of Each Receipt this Period 15.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : ADD17C8650AE14C5E9AD
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 35.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1508 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : AC98875AEFFDD4852B27
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A9D7FAE2C1F6E4FA0A61
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A6C9B875FD4A84ED6AD1
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1509 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021
Transaction ID : A607380E5542E4494A7A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2021
Transaction ID : A62DC6A6B9EBD45B6BA3
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : A3E72AC4E01E2424B929
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1510 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : ABCFD5966EEC849CFA6C
 Amount of Each Receipt this Period 15.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A9F0DF63DD4744B4CA72
 Amount of Each Receipt this Period 5.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A8695B84351CC4B7BA31
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1511 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : AEE5981C02BAB4350A1A
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A73905492A6444B5FB24
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A880538A315BC49E9B7F
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1512 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021

Transaction ID : A457E5557029D48B9BE7

Amount of Each Receipt this Period
25.00

Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021

Transaction ID : A40D86D46327C4BADA96

Amount of Each Receipt this Period
15.00

Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021

Transaction ID : AFA231D9BC55448D6917

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1513 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2021

Transaction ID : AE3406D6F108343C5AF4

Amount of Each Receipt this Period
5.00

Memo Item

B. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : A798501B655E74A09BB6

Amount of Each Receipt this Period
15.00

Memo Item

C. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : ACF5B54A8BB3C4098BF5

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1514 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A84D26078B54240E3854
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : A50E3864BF07D46B78D1
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : ADE93AA8FDECB4BB6B63
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1515 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A1459058611F14D24BC4
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A9E57EB7A8FBD4CBEAF7
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. MURRAY, CHARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 ALKII WAY
 City DIAMONDHEAD State MS Zip Code 39525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 885.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : A29DB24491E834840A59
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1516 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2021

Transaction ID : A0BA0BADB6B744E9582E

Amount of Each Receipt this Period
35.00

Memo Item

B. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
935.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2021

Transaction ID : AB20C75724B4A45B7972

Amount of Each Receipt this Period
15.00

Memo Item

C. MURRAY, CHARLENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 574 ALKII WAY

City DIAMONDHEAD	State MS	Zip Code 39525
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : A9688455AEB694AE1B88

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1517 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 PEBBLE HILL DRIVE
 City COLLEYVILLE State TX Zip Code 76034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER/VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 10 / 2021**
Transaction ID : A416805D71302441E93D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MURRAY, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 PEBBLE HILL DRIVE
 City COLLEYVILLE State TX Zip Code 76034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER/VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : A975568A78C234C3FA0A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MURRAY, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 PEBBLE HILL DRIVE
 City COLLEYVILLE State TX Zip Code 76034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER/VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : A881CD173649C45AFA6B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1518 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 PEBBLE HILL DRIVE
 City COLLEYVILLE State TX Zip Code 76034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) HOMEMAKER/VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A578C95E994494E0BBEA
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MURRAY, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 914 CREST PARK DRIVE
 City SILVER SPRING State MD Zip Code 20903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 01 / 2021
Transaction ID : ABB70FA7D66084511960
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MURRAY, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 914 CREST PARK DRIVE
 City SILVER SPRING State MD Zip Code 20903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 10 / 2021
Transaction ID : A61BE422DF3FE4477B3F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1519 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **02 / 15 / 2021**
Transaction ID : A14B534AB72FB409EAEF
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 20 / 2021**
Transaction ID : A323D9FA9531A4F6CA1C
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 01 / 2021**
Transaction ID : AD567EC3FC8FA4D6FB35
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1520 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 08 / 2021
Transaction ID : AA1D03AC781D243C5BF3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 20 / 2021
Transaction ID : AE82EEBACDD424B0A96B
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A2367BD45DA4B4D539F5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1521 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3705 CHURCHILL RD

City OKLAHOMA CITY	State OK	Zip Code 73165
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2021

Transaction ID : AE70E451B36284BE5A89

Amount of Each Receipt this Period
25.00

Memo Item

B. MURRAY, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3705 CHURCHILL RD

City OKLAHOMA CITY	State OK	Zip Code 73165
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2021

Transaction ID : A385C6E7513CE44778B0

Amount of Each Receipt this Period
25.00

Memo Item

C. MURRAY, RONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3705 CHURCHILL RD

City OKLAHOMA CITY	State OK	Zip Code 73165
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC	Occupation (for Individual) CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2021

Transaction ID : A3D9811A3DB174643ACC

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1522 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A6C9C2EFBDA43452CB2E
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A188B6145D9F546A6A7C
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A9E2CEA305BFC4DE28B9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1523 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURRAY, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 CHURCHILL RD
 City OKLAHOMA CITY State OK Zip Code 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERFORMANCE CONSULTING, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A15F5F6694656457D8CB
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MUSHANEY, MAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14140 ESTERO ROAD
 City VICTORVILLE State CA Zip Code 92392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 04 / 10 / 2021
Transaction ID : A952C07F1D3BD4AE4BA5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MUSHANEY, MAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14140 ESTERO ROAD
 City VICTORVILLE State CA Zip Code 92392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A9585C0BC93EC471C9AD
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1524 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUSHANEY, MAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14140 ESTERO ROAD
 City VICTORVILLE State CA Zip Code 92392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A34528DE282A549BB9D6
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MUSHANEY, MAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14140 ESTERO ROAD
 City VICTORVILLE State CA Zip Code 92392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A385646D90AC643BA804
 Amount of Each Receipt this Period 5.00
 Memo Item

C. MUSHANEY, MAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14140 ESTERO ROAD
 City VICTORVILLE State CA Zip Code 92392
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A81918C8D8E864CE38ED
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1525 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUSTIN, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 ALBANY ROAD

City OAK RIDGE	State TN	Zip Code 37830-5711
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2021

Transaction ID : A1244AC92228A46C8BAF

Amount of Each Receipt this Period
50.00

Memo Item

B. MUSTIN, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 ALBANY ROAD

City OAK RIDGE	State TN	Zip Code 37830-5711
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2021

Transaction ID : A166EF10299C74025801

Amount of Each Receipt this Period
50.00

Memo Item

C. MYNATT, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 622 WINWOOD DR.

City BIRMINGHAM	State AL	Zip Code 35226
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INSURANCE SALES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2021

Transaction ID : A22922AC28E1A4E88A4F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1526 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MYNATT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 WINWOOD DR.
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AD8748F8C9E6F4C59A63
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MYRICK, JAKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4387 MALLARD CREEK CIRCLE
 City STOCKTON State CA Zip Code 95207-5213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AA36955C9ED694F0E96F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 15 / 2021
Transaction ID : A08CBBB4E039E42CFBB9
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1527 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 08 / 2021
Transaction ID : A918E168C34464C0FB69
 Amount of Each Receipt this Period 50.00
 Memo Item

B. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A10BDA244FF814CB5AF7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 08 / 2021
Transaction ID : AD43693E101DF47C68D4
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1528 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 15 / 2021
Transaction ID : AF1C560326A5B46F8915
 Amount of Each Receipt this Period 100.00
 Memo Item

B. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AD2453BA08D574FD4A42
 Amount of Each Receipt this Period 50.00
 Memo Item

C. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 15 / 2021
Transaction ID : ACE667E4C60B242F29E6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1529 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NADEAU, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12175 240TH ST EAST
 City HAMPTON State MN Zip Code 55031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A35F148D8168C4D6E94B
 Amount of Each Receipt this Period 100.00
 Memo Item

B. NAGY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15549 SHERMAN WAY 312
 City VAN NUYS State CA Zip Code 91406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTOMATION ELECTRIC CO Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A4F24F26574574DEDB4C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. NAILS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8529 SPRING AZURE WAY
 City ELK GROVE State CA Zip Code 95624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A6826DCE384434FC7966
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1530 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE

City CAMBRIA	State CA	Zip Code 93428
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021

Transaction ID : A969584DDD76541CCBF8

Amount of Each Receipt this Period
50.00

Memo Item

B. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE

City CAMBRIA	State CA	Zip Code 93428
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021

Transaction ID : A1ECE8B9A3A6F45C7B53

Amount of Each Receipt this Period
35.00

Memo Item

C. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE

City CAMBRIA	State CA	Zip Code 93428
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021

Transaction ID : A7C463B1218094E2DBCA

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1531 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE
 City CAMBRIA State CA Zip Code 93428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : AB52508CF87A941219E9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE
 City CAMBRIA State CA Zip Code 93428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : AF4D89F6AA5A247C1B4E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE
 City CAMBRIA State CA Zip Code 93428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : ACAD036AF2A7C42E7A52
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1532 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE
 City CAMBRIA State CA Zip Code 93428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A7407DFB504E4EA4B6E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. NANKIVELL, MELANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5840 MOONSTONE BEACH DRIVE
 City CAMBRIA State CA Zip Code 93428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : A4C4E32F19C88423FA0C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. NANTZ, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31724 BOCK ST
 City GARDEN CITY State MI Zip Code 48135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A0635BE7DC0E74140827
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1533 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NANTZ, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31724 BOCK ST
 City GARDEN CITY State MI Zip Code 48135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A7CBD7E8325B04C2D8CF
 Amount of Each Receipt this Period 25.00
 Memo Item

B. NAPPI, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 384 EAGLE DRIVE
 City JUPITER State FL Zip Code 33477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A7DEB9C074C434E059EA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. NARA, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7820 FANNING CT APT 452
 City FORT MYERS State FL Zip Code 33907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 06 / 2021
Transaction ID : AB0B155D973E44DD4B5F
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1534 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NARGELE, DOMINIK, G., LTCOL, USMC RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 S. IVY STREET

City ARLINGTON	State VA	Zip Code 22204
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTHOR OF BOOKS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : AD24E1C64EAE04B89944

Amount of Each Receipt this Period
50.00

Memo Item

B. NARGELE, DOMINIK, G., LTCOL, USMC RET.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 S. IVY STREET

City ARLINGTON	State VA	Zip Code 22204
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) AUTHOR OF BOOKS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Transaction ID : ADC2E4C7CC1C8424198F

Amount of Each Receipt this Period
50.00

Memo Item

C. NAUMAN, ANNA, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 60291

City OKLAHOMA CITY	State OK	Zip Code 73146
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2021

Transaction ID : A7D1F16E3138547A586E

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1535 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEAL, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12637 LITTLE ELM RD
 City FARMINGTON State AR Zip Code 72730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A48CC5F06844B45D784F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. NEELY, MIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11267 S.ADAMS AVE
 City YUMA State AZ Zip Code 85365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STONE RIDGE CHURCH Occupation (for Individual) PRESCHOOL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AD1D8C618AB3544E3B8C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. NEFF, VIVIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 364 WOODLAND CIRCLE
 City LUGOFF State SC Zip Code 29078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AD88CEDC29E7D4A9EA3C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1536 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEIGHBORS, BRYCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1580 EAST VIA VERDE STREET

City COVINA	State CA	Zip Code 91724
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMD	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2021

Transaction ID : AF3A899DB03714E06976

Amount of Each Receipt this Period
50.00

Memo Item

B. NELSON, HENRI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 E. BELLEVIEW AVE.

City GREENWOOD VILLAGE	State CO	Zip Code 80121-1626
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2021

Transaction ID : AD0F22EA20D4049B2BAF

Amount of Each Receipt this Period
100.00

Memo Item

C. NELSON, HENRI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2500 E. BELLEVIEW AVE.

City GREENWOOD VILLAGE	State CO	Zip Code 80121-1626
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2021

Transaction ID : A3310DF250FFD44E79D9

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1537 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NELSON, HENRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 E. BELLEVIEW AVE.
 City GREENWOOD VILLAGE State CO Zip Code 80121-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2021
Transaction ID : AF055D2BA61C243A3AAC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. NELSON, HENRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 E. BELLEVIEW AVE.
 City GREENWOOD VILLAGE State CO Zip Code 80121-1626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A2540985DD2FB4C46BCC
 Amount of Each Receipt this Period 100.00
 Memo Item

C. NELSON, REBECCA, JAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2013 HOLLY HILL DRIVE
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 06 / 2021
Transaction ID : AB2158251BF534BA89CD
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1538 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NELSON, REBECCA, JAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2013 HOLLY HILL DRIVE
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 06 / 2021**
Transaction ID : A54919AEDDD0D4DD1AFF
 Amount of Each Receipt this Period 250.00
 Memo Item

B. NELSON, REBECCA, JAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2013 HOLLY HILL DRIVE
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 06 / 2021**
Transaction ID : A4C4204E372FC4ACBB85
 Amount of Each Receipt this Period 250.00
 Memo Item

C. NELSON, REBECCA, JAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2013 HOLLY HILL DRIVE
 City TYLER State TX Zip Code 75703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 06 / 2021**
Transaction ID : A2970BDBAB33A488D855
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1539 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NELSON, REBECCA, JAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2013 HOLLY HILL DRIVE

City TYLER	State TX	Zip Code 75703
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021

Transaction ID : AE6085B161900499BA90

Amount of Each Receipt this Period
250.00

Memo Item

B. NELSON, REBECCA, JAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2013 HOLLY HILL DRIVE

City TYLER	State TX	Zip Code 75703
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021

Transaction ID : A694BC2434203485BB07

Amount of Each Receipt this Period
250.00

Memo Item

C. NELSON, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 GRAND ASHBURY LANE

City SUGAR HILL	State GA	Zip Code 30518
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021

Transaction ID : AA3B9EFB5B9634937955

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1540 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEUMANN, WAYNE, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 HIBERNIA RD.
 City ROCKAWAY State NJ Zip Code 07866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A5801A2D5A1514894A3C
 Amount of Each Receipt this Period 5.00
 Memo Item

B. NEUMANN, WAYNE, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 HIBERNIA RD.
 City ROCKAWAY State NJ Zip Code 07866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A337513CDCC754E98879
 Amount of Each Receipt this Period 10.00
 Memo Item

C. NEUMANN, WAYNE, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 HIBERNIA RD.
 City ROCKAWAY State NJ Zip Code 07866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A3826EB78490440CEBF7
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1541 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. NEWBROUGH, JAMES, , ,

Mailing Address 800 2ND AVE

City NEW CUMBERLAND State WV Zip Code 26047

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2021

Transaction ID : **AC768A937EAA04578BC5**

Amount of Each Receipt this Period
200.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. NEWBROUGH, JAMES, , ,

Mailing Address 800 2ND AVE

City NEW CUMBERLAND State WV Zip Code 26047

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2021

Transaction ID : **A4976BFF75D9646C489B**

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NEWBROUGH, JAMES, , ,

Mailing Address 800 2ND AVE

City NEW CUMBERLAND State WV Zip Code 26047

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2021

Transaction ID : **AA0B441E132D7473CB72**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1542 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEWBROUGH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 2ND AVE
 City NEW CUMBERLAND State WV Zip Code 26047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 19 / 2021**
Transaction ID : AA31405A56E774689BE3
 Amount of Each Receipt this Period 100.00
 Memo Item

B. NEWBROUGH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 2ND AVE
 City NEW CUMBERLAND State WV Zip Code 26047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **05 / 19 / 2021**
Transaction ID : AB0D1943ACECD434BB97
 Amount of Each Receipt this Period 100.00
 Memo Item

C. NEWBROUGH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 2ND AVE
 City NEW CUMBERLAND State WV Zip Code 26047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **06 / 16 / 2021**
Transaction ID : A7555B42023A7499E9B0
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1543 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEWBROUGH, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 2ND AVE
 City NEW CUMBERLAND State WV Zip Code 26047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A49702E2EB1E2433B9B0
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. NEWELL, GUYUHH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1830 MANGO ST NE
 City PALM BAY State FL Zip Code 32905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEONARDO DRS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A7D4760A989DC43BD954
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. NEWELL, GUYUHH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1830 MANGO ST NE
 City PALM BAY State FL Zip Code 32905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEONARDO DRS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A1741A488CA0540B5B09
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1544 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEWMAN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1974 SW BAYSHORE BLVD
 City PORT ST LUCIE State FL Zip Code 34984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUDGET GRAPHICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A3E62E1B28E784CEB82A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. NGUYEN, SON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1544 E HEARNE WAY
 City GILBERT State AZ Zip Code 85234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GE MEDICAL Occupation (for Individual) TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A391ADC82D3214C7099D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. NICHOLSON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 HOLLY FOREST
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AECB9E189682B4908A17
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1545 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NICHOLSON, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 HOLLY FOREST
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A4BCBBAF309EC48D6A6C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. NICKERSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 W. HOUSTON ST
 City HIGHLANDS State TX Zip Code 77562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A7662E63F7F1A4DEFAB51
 Amount of Each Receipt this Period 25.00
 Memo Item

C. NICKERSON, JAY, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 BICKFORD AVE
 City REVERE State MA Zip Code 02151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 14 / 2021
Transaction ID : A963BA9902CE54C189AE
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1546 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NICKERSON, JAY, , , SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 BICKFORD AVE

City REVERE	State MA	Zip Code 02151
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2021

Transaction ID : A26C39E84B1E54E28A68

Amount of Each Receipt this Period
50.00

Memo Item

B. NICKERSON, JAY, , , SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 BICKFORD AVE

City REVERE	State MA	Zip Code 02151
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2021

Transaction ID : A5F73F297A14B42F99A6

Amount of Each Receipt this Period
100.00

Memo Item

C. NICKERSON, JAY, , , SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 BICKFORD AVE

City REVERE	State MA	Zip Code 02151
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2021

Transaction ID : AE611CE804BF24308B2B

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1547 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NICKERSON, JAY, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 BICKFORD AVE

City REVERE	State MA	Zip Code 02151
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : AE780AFDD1E97436F893

Amount of Each Receipt this Period
 100.00

Memo Item

B. NICKERSON, JAY, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 BICKFORD AVE

City REVERE	State MA	Zip Code 02151
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A333E295668D843DEB8E

Amount of Each Receipt this Period
 50.00

Memo Item

C. NICKERSON, JAY, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 BICKFORD AVE

City REVERE	State MA	Zip Code 02151
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A4D8EB9AF233D4AED931

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1548 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NICKERSON, JAY, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 BICKFORD AVE
 City REVERE State MA Zip Code 02151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A621A4FF317E24373B12
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. NITZ, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 386 N WINNEBAGO DR
 City LAKE WINNEBAGO State MO Zip Code 64034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : AD3FBD0A4E4D24284A91
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. NITZ, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 386 N WINNEBAGO DR
 City LAKE WINNEBAGO State MO Zip Code 64034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AC7A8E83A032D4DBDA46
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1549 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NIXON, LYNDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 SUNSET VIEW DRIVE
 City BETHLEHEM State PA Zip Code 18017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AEFB18164D1B24BEB851
 Amount of Each Receipt this Period 30.00
 Memo Item

B. NIX, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8371 SANTA MARGARITA LN.
 City LA PALMA State CA Zip Code 90623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SHARON NIX BROKERAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : AE2681D150C5344318A4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. NIX, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8371 SANTA MARGARITA LN.
 City LA PALMA State CA Zip Code 90623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SHARON NIX BROKERAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A8F773D0CE8A24DD79A1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1550 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NOBLE, JACK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1203 TANGLEWOOD DR.

City WEATHERFORD	State TX	Zip Code 76087
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2021

Transaction ID : ACE8679AA92FC456CA24

Amount of Each Receipt this Period
35.00

Memo Item

B. NOFTZ, LEATON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 736 SRYMOUR LK. RD.

City SALT LICK	State KY	Zip Code 40371
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2021

Transaction ID : AD08ACAAAD087433FB86

Amount of Each Receipt this Period
50.00

Memo Item

C. NOFTZ, LEATON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 736 SRYMOUR LK. RD.

City SALT LICK	State KY	Zip Code 40371
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : A16760DC6D425427CBAF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1551 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NOLAND, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1105 CHESTERFIELD RD.

City HUNTSVILLE	State AL	Zip Code 35803
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MITRE	Occupation (for Individual) PROGRAM MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : ADCD90430C4514DEF971

Amount of Each Receipt this Period
50.00

Memo Item

B. NOLAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11761 CHERBORG

City WOODBIDGE	State VA	Zip Code 22192
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PSS	Occupation (for Individual) ACQ SPEC
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2021

Transaction ID : ABE77BF1F814C40C6BA7

Amount of Each Receipt this Period
50.00

Memo Item

C. NOLAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11761 CHERBORG

City WOODBIDGE	State VA	Zip Code 22192
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PSS	Occupation (for Individual) ACQ SPEC
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2021

Transaction ID : A2F3C2850E36A40A99BA

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1552 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NOONE, CARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 N NATCHEZ DR.
 City MADISON State MS Zip Code 39110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BHHS GATEWAY REAL ESTATE Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A81EC6E6A8031497EAE9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. NOORLANDER, STANLEY, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 N 100 W
 TRLR 8
 City MOAB State UT Zip Code 84532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A707095650FEF41D3949
 Amount of Each Receipt this Period 250.00
 Memo Item

C. NORMAN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 BARR STREET
 City LEONARD State TX Zip Code 75452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A8C6AFBBD67FE42CDBDF
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1553 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2021

Transaction ID : A790A1FB832274B0983C

Amount of Each Receipt this Period
15.00

Memo Item

B. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2021

Transaction ID : A6F5B14FB637E48B4BEA

Amount of Each Receipt this Period
25.00

Memo Item

C. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2021

Transaction ID : A33063FF26DB74887B83

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1554 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 02 / 19 / 2021
Transaction ID : A924D19140590445D826
 Amount of Each Receipt this Period 5.00
 Memo Item

B. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 21 / 2021
Transaction ID : A2A78A348C8DA4D4EA8B
 Amount of Each Receipt this Period 15.00
 Memo Item

C. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 02 / 23 / 2021
Transaction ID : AC6A3811986924823BA6
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1555 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2021

Transaction ID : AB2F0165FEEE9445BB72

Amount of Each Receipt this Period
5.00

Memo Item

B. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

Transaction ID : A8D744B597F5042CC8C4

Amount of Each Receipt this Period
15.00

Memo Item

C. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2021

Transaction ID : A226CA706DCE841ECACE

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1556 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2021

Transaction ID : A60A28E0371FA49C4B3D

Amount of Each Receipt this Period
15.00

Memo Item

B. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2021

Transaction ID : ABDFC40F418794A0E900

Amount of Each Receipt this Period
25.00

Memo Item

C. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2021

Transaction ID : A36EB20D2A2CD46CCA4A

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1557 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A5ACB1941CA6A4DD8AEI
 Amount of Each Receipt this Period 15.00
 Memo Item

B. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 03 / 19 / 2021
Transaction ID : AA317F023686E485E9F3
 Amount of Each Receipt this Period 5.00
 Memo Item

C. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 21 / 2021
Transaction ID : AF8E4879801514CD5936
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1558 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2021

Transaction ID : A98B48E3E5E0F44ABACE

Amount of Each Receipt this Period
35.00

Memo Item

B. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2021

Transaction ID : AFF9BE269B1D04BFEEA8

Amount of Each Receipt this Period
5.00

Memo Item

C. NORRIS, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2021

Transaction ID : AC92BE71FD149418ABB5

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1559 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021

Transaction ID : AC3C13E276467468A899

Amount of Each Receipt this Period
45.00

Memo Item

B. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021

Transaction ID : A3A8538C719174D7FA48

Amount of Each Receipt this Period
15.00

Memo Item

C. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE

City FAIRPORT	State NY	Zip Code 14450
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
515.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021

Transaction ID : A037D12612B034C31853

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1560 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt **04 / 13 / 2021**
Transaction ID : A7BA4AA706E954A8FA20
 Amount of Each Receipt this Period 15.00
 Memo Item

B. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : A85BEAE53ED054364A0A
 Amount of Each Receipt this Period 15.00
 Memo Item

C. NORRIS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 SUGARMILLS CIRCLE
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt **04 / 19 / 2021**
Transaction ID : A76212C28E6F146F6AFB
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1561 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NOTTER, ALBERT, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18721 CENTRAL POINT RD APT 37
 City OREGON CITY State OR Zip Code 97045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOME DEPOT Occupation (for Individual) SALES ASSOCIATE
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A7E596B087F124ECCA07
 Amount of Each Receipt this Period 30.00
 Memo Item

B. NOYES, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22022 FLORAL AVE NE
 City AURORA State OR Zip Code 97002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 20 / 2021
Transaction ID : AAC38A4EB3F744AD9A6C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. NUNEZ, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CRESTMONT RD APT 6J
 City MONTCLAIR State NJ Zip Code 07042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A08E9CA0031C54488968
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1562 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NYBERG, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21840 NE SUNNYCREST RD
 City NEWBERG State OR Zip Code 97132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : ADA2DE7AF382540CDBEI
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. NYBERG, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21840 NE SUNNYCREST RD
 City NEWBERG State OR Zip Code 97132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : ACF4A324499544593A1A
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. OAKLEY, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18211 INDIAN SPRINGS RD
 City PENN VALLEY State CA Zip Code 95946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A98FBA39B50FE40318A4
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1563 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OAKLEY, SHERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18211 INDIAN SPRINGS RD
 City PENN VALLEY State CA Zip Code 95946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A2F896FFDED224126A51
 Amount of Each Receipt this Period 25.00
 Memo Item

B. OBANION, GLENN, , , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 MIRROR LK
 City SAN ANTONIO State TX Zip Code 78260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL GOVT Occupation (for Individual) LOGISTICS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AB0F74764845E4094889
 Amount of Each Receipt this Period 50.00
 Memo Item

C. OBANION, GLENN, , , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 MIRROR LK
 City SAN ANTONIO State TX Zip Code 78260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDERAL GOVT Occupation (for Individual) LOGISTICS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A7E58FD95DE764EDDAAF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1564 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OBERLE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3906 LAKEHILL PARK CT.
 City SUGAR LAND State TX Zip Code 77498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AC00AB4AF023D4B5C899
 Amount of Each Receipt this Period 35.00
 Memo Item

B. O'BRIEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5310 HARVEST HILL 136
 City DALLAS State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) O'BRIEN ARCHITECTS Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A7FCD1BB4C5F04FD596F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. O'BRIEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5310 HARVEST HILL 136
 City DALLAS State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) O'BRIEN ARCHITECTS Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A473C31FB9259437CBF7
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1565 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OCCHIATO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 HARROGATE
 City PUEBLO State CO Zip Code 81001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A815AAB4A8DE04393AA5
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. OCCHIATO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 HARROGATE
 City PUEBLO State CO Zip Code 81001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AD4106EE7FEC44660898
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. OC, MARLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15589 S 291ST E. AVE.
 City COWETA State OK Zip Code 74429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A797487D61AA54917B82
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1566 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OCONNELL, JOHN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8215 4TH AVE APT C1
 City BROOKLYN State NY Zip Code 11209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : AF3C35F487B6A45DAA45
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. OCONNELL, JOHN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8215 4TH AVE APT C1
 City BROOKLYN State NY Zip Code 11209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AE17E0404062D47E588D
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ODENTHAL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2529 BRENTWOOD DR.
 City LANCASTER State CA Zip Code 93536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AFD5CBE47D2C044FC88F
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1567 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. O'DONELL, JOHN, , ,

Mailing Address **PO BOX 618**

City **VENICE** State **FL** Zip Code **34284**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
05 / 19 / 2021
Transaction ID : A4C3C5A52415C478CAD9

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. O'DONELL, JOHN, , ,

Mailing Address **PO BOX 618**

City **VENICE** State **FL** Zip Code **34284**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
06 / 19 / 2021
Transaction ID : A2724E22533C94EB2B07

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. O'DONNELL, MICHAEL, , ,

Mailing Address **685 SPRING ST.
#186**

City **FRIDAY HARBOR** State **WA** Zip Code **98250**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
03 / 14 / 2021
Transaction ID : AC771E58E46CF40B085F

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **200.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1568 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DONNELL, MICHAEL, , ,

Mailing Address 685 SPRING ST.
#186

City FRIDAY HARBOR	State WA	Zip Code 98250
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2021

Transaction ID : A4C1A0DD794AF4DEFB2A

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DONNELL, MICHAEL, , ,

Mailing Address 685 SPRING ST.
#186

City FRIDAY HARBOR	State WA	Zip Code 98250
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A309E210E35D74895ACE

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DONNELL, MICHAEL, , ,

Mailing Address 685 SPRING ST.
#186

City FRIDAY HARBOR	State WA	Zip Code 98250
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A16DCC8231CB54496B05

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1569 OF 3012
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ODUM, FREIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MYRTLEWOOD DRIVE

City SAVANNAHF	State GA	Zip Code 31405
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2021

Transaction ID : A55B295FD63754BD7830

Amount of Each Receipt this Period
35.00

Memo Item

B. ODUM, FREIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MYRTLEWOOD DRIVE

City SAVANNAHF	State GA	Zip Code 31405
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2021

Transaction ID : A44637E7A7E594972B92

Amount of Each Receipt this Period
50.00

Memo Item

C. ODUM, FREIDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MYRTLEWOOD DRIVE

City SAVANNAHF	State GA	Zip Code 31405
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2021

Transaction ID : AEDA657095F68472EA6A

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1570 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAHF State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **04 / 04 / 2021**
Transaction ID : A3BB8CBD0EBF8426F806
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAHF State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A87642F4145254EB1B45
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ODUM, FREIDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MYRTLEWOOD DRIVE
 City SAVANNAHF State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **05 / 04 / 2021**
Transaction ID : A85894B2D40E6417B97F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1571 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OFFREDI, GENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 PADDOCK LANE

City GUILFORD	State CT	Zip Code 06437-2809
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2021

Transaction ID : ABE09AA9BA57F4FADBB:

Amount of Each Receipt this Period
50.00

Memo Item

B. OFFREDI, GENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 PADDOCK LANE

City GUILFORD	State CT	Zip Code 06437-2809
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2021

Transaction ID : A19487CE9706F4F9C863

Amount of Each Receipt this Period
35.00

Memo Item

C. OFFREDI, GENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 PADDOCK LANE

City GUILFORD	State CT	Zip Code 06437-2809
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2021

Transaction ID : A44D0D81257944DE6A23

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1572 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : AE74C6884E4794AF893A
 Amount of Each Receipt this Period 25.00
 Memo Item

B. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt **03 / 10 / 2021**
Transaction ID : A9F417E7FEF3145A69E7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : AE8FDFAF5FA6E408C9AB
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1573 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt **03 / 27 / 2021**
Transaction ID : A42EABB1C47594EA3877
 Amount of Each Receipt this Period 50.00
 Memo Item

B. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : AB5FCED3E67354D7496C
 Amount of Each Receipt this Period 25.00
 Memo Item

C. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : AB68D2F382402415CB4A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1574 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : AA80548DEC17F407096C
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : AC1A9B7EE68E9495784F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : AFFA805550D104564B5E
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1575 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 715.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021
Transaction ID : A71F9B89B429342C5AB5
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A2CEA80399AC447C1B47
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : AA754DEE3E95C41A88F8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1576 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A672C0D12A02949A6BA1
 Amount of Each Receipt this Period 25.00
 Memo Item

B. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **06 / 10 / 2021**
Transaction ID : A98A29E06CBA54FE4A9F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 910.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : AD2F6BCC3109042D492E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1577 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OFFREDI, GENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PADDOCK LANE
 City GUILFORD State CT Zip Code 06437-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : AC5384ECB4B7B43189A9
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. O'FLYNN, ARMINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 NE 114TH ST APT2304
 City MIAMI State FL Zip Code 33181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A9D4ABA8D5A3249A0BE6
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. OJNIK, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6967 AUBURN RIDGE DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UH HOSPITALS OF CLEVELAND Occupation (for Individual) NURSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A842EC64EE1244591B11
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1578 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OJNIK, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6967 AUBURN RIDGE DR
 City PAINESVILLE State OH Zip Code 44077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UH HOSPITALS OF CLEVELAND Occupation (for Individual) NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : AA24E1CC1BD0044598EA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. OLD, HORACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 TULLS BAY DR.
 City MOYOCK State NC Zip Code 27958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOWARD HANNA Occupation (for Individual) R/E BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : A73BDAE0906674B43BDD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. OLD, HORACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 TULLS BAY DR.
 City MOYOCK State NC Zip Code 27958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOWARD HANNA Occupation (for Individual) R/E BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : A63CC4742F5FB472C9D2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1579 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSEN, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 FRIENDS WAY
 City SAINT JAMES State NY Zip Code 11780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 16 / 2021
Transaction ID : ADEDA215AC33A4C1EB6;
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 ROYAL LYTHAM GLEN
 City ESCONDIDO State CA Zip Code 92026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A5493470D06C74B40BAD
 Amount of Each Receipt this Period 100.00
 Memo Item

C. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 ROYAL LYTHAM GLEN
 City ESCONDIDO State CA Zip Code 92026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A1225F925131541D0B4D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1580 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 ROYAL LYTHAM GLEN
 City ESCONDIDO State CA Zip Code 92026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : AD9A957A2A0B94DFB9C1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. OLSON, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2143 ROYAL LYTHAM GLEN
 City ESCONDIDO State CA Zip Code 92026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : AFD61CF69C59743C3AEA
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2021
Transaction ID : AA30CBD663E0143FDB25
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1581 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLSON, L RAY, , ,

Mailing Address **PO BOX 9328**

City **SALT LAKE CITY** State **UT** Zip Code **84109**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
02 / 09 / 2021

Transaction ID : A0607BA5AED1641C399B

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLSON, L RAY, , ,

Mailing Address **PO BOX 9328**

City **SALT LAKE CITY** State **UT** Zip Code **84109**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt
02 / 14 / 2021

Transaction ID : A3435723BAA054E088F1

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OLSON, L RAY, , ,

Mailing Address **PO BOX 9328**

City **SALT LAKE CITY** State **UT** Zip Code **84109**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt
02 / 15 / 2021

Transaction ID : AE33D5A9EBB1A42919D1

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **185.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1582 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2021
Transaction ID : AED45D4DEC933475EABE
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2021
Transaction ID : AAA70B2CF550144979DF
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : A910328C598484829AA4
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1583 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A28BA6B137F674D1D990
 Amount of Each Receipt this Period 35.00
 Memo Item

B. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 03 / 27 / 2021
Transaction ID : A19DC819BC4164BE6944
 Amount of Each Receipt this Period 35.00
 Memo Item

C. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 04 / 09 / 2021
Transaction ID : A568258C9FB314DBD96C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1584 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : A7BE48492530247B2B7D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 845.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : AAF4C3ACF97214C0E97E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt **04 / 27 / 2021**
Transaction ID : AA6DCD34ED9104E0F990
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1585 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSON, L RAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9328

City SALT LAKE CITY	State UT	Zip Code 84109
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
930.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021

Transaction ID : AED471B0888984C148C4

Amount of Each Receipt this Period
50.00

Memo Item

B. OLSON, L RAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9328

City SALT LAKE CITY	State UT	Zip Code 84109
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1030.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021

Transaction ID : A175E0C52137F4EADA5E

Amount of Each Receipt this Period
100.00

Memo Item

C. OLSON, L RAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9328

City SALT LAKE CITY	State UT	Zip Code 84109
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1065.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021

Transaction ID : A594AFA6432DA40DE878

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1586 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328

City SALT LAKE CITY	State UT	Zip Code 84109
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A0AC70370286C4D499D1

Amount of Each Receipt this Period
 35.00

Memo Item

B. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328

City SALT LAKE CITY	State UT	Zip Code 84109
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : A35BAE33ECB7F4A7680F

Amount of Each Receipt this Period
 50.00

Memo Item

C. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328

City SALT LAKE CITY	State UT	Zip Code 84109
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AE52F7788B125470EBAE

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1587 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1285.00

Date of Receipt
 06 / 15 / 2021
Transaction ID : A244C967C3064401DBF8
 Amount of Each Receipt this Period 35.00
 Memo Item

B. OLSON, L RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9328
 City SALT LAKE CITY State UT Zip Code 84109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1320.00

Date of Receipt
 06 / 27 / 2021
Transaction ID : A38D4BE0DD9D44698BA3
 Amount of Each Receipt this Period 35.00
 Memo Item

C. OMARA, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10079 MEADOW POND DR
 City MECHANICSVILLE State VA Zip Code 23116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANK OF AMERICA MERCHANT SERVICES Occupation (for Individual) HR OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 08 / 2021
Transaction ID : A15EA1DF5FA624C2897C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1588 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ONEAL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8119 WYCOMB DR
 City HOUSTON State TX Zip Code 77070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : A190F32F731144EE5B14
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. OOSTMAN, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15404 S WALNUT RD HSE
 City OAK FOREST State IL Zip Code 60452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2021
Transaction ID : AA0EB48E18E124FFAAF8
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. OOSTMAN, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15404 S WALNUT RD HSE
 City OAK FOREST State IL Zip Code 60452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A8202646E09C04490B18
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 1589 OF 3012
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OOSTMAN, DOLORES, , ,
Mailing Address 15404 S WALNUT RD
HSE
City OAK FOREST State IL Zip Code 60452
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 900.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A26FCBB71CAF64FD7BB5
Amount of Each Receipt this Period 300.00
Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OOSTMAN, DOLORES, , ,
Mailing Address 15404 S WALNUT RD
HSE
City OAK FOREST State IL Zip Code 60452
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1200.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A754791BFBCAB46EB95B
Amount of Each Receipt this Period 300.00
Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OOSTMAN, DOLORES, , ,
Mailing Address 15404 S WALNUT RD
HSE
City OAK FOREST State IL Zip Code 60452
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 1500.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A7E65BE0DA0B04D25A1B
Amount of Each Receipt this Period 300.00
Memo Item

SUBTOTAL of Receipts This Page (optional)..... 900.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1590 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OOSTMAN, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15404 S WALNUT RD
 HSE
 City OAK FOREST State IL Zip Code 60452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A412E8531FC5C4629A50
 Amount of Each Receipt this Period 300.00
 Memo Item

B. OREA-KOHAVI, YVETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1450 HARRELL RD
 City HOWE State TX Zip Code 75459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DR. R. EFSEROFF DDS Occupation (for Individual) DENTAL HYGIENIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 16 / 2021
Transaction ID : AD4B44436130E4A6BB5C
 Amount of Each Receipt this Period 500.00
 Memo Item

C. ORENDAIN, TOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16835 ADDISON RD
 City ADDISON State TX Zip Code 75001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OPTICAL & TELECOMM INC. Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A17819B03952E4DE8A02
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1591 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OROURKE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 CR 432
 City PLEASANTON State TX Zip Code 78064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A60B99DA5A7F247EE9CF
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. OROURKE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 CR 432
 City PLEASANTON State TX Zip Code 78064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : AF989BBCF51FC464885F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ORSINI, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 AZALEA CT
 City LINCOLN State CA Zip Code 95648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2021
Transaction ID : AE5071360AE894A9488C
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1592 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ORTENSE, ROBERT, , ,

Mailing Address 11MINNISINK AVE

City TOTOWA State NJ Zip Code 07512

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
05 / 02 / 2021
Transaction ID : A27E372930E6B409785A

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ORTENSE, ROBERT, , ,

Mailing Address 11MINNISINK AVE

City TOTOWA State NJ Zip Code 07512

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
06 / 02 / 2021
Transaction ID : A271099414BF248CEAD9

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ORTH, SUSAN, INEZ, ,

Mailing Address 6411 N. 29TH STREET

City PHOENIX State AZ Zip Code 85016

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 30 / 2021
Transaction ID : A552DD9406BBA4F81905

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1593 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ORTON, VANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4632 LAFAYETTE AVE
 City FORT WORTH State TX Zip Code 76107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKTA Occupation (for Individual) SALES ENG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A614159EC78C54900BB8
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ORTON, VANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4632 LAFAYETTE AVE
 City FORT WORTH State TX Zip Code 76107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OKTA Occupation (for Individual) SALES ENG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A1168BF32164B4289A92
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ORWIG, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 FLATCREEK PLACE
 City SPRING State TX Zip Code 77381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A831318BD7A0F4E118D1
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1594 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ORWIG, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 FLATCREEK PLACE
 City SPRING State TX Zip Code 77381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A5C80116D8E4444E1A5E
 Amount of Each Receipt this Period 5.00
 Memo Item

B. OSCAR, CROMER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1877 NEAL DR
 City CLARKSTON State WA Zip Code 99403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AEB0B0A61A4F446238F6
 Amount of Each Receipt this Period 35.00
 Memo Item

C. OSTER, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 WILLOW POND
 City WAITE PARK State MN Zip Code 56387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A1061EC1170214D179FE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1595 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OSTRANDER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4419 PARK GREEN CT
 City SACRAMENTO State CA Zip Code 95821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2021
Transaction ID : AAC3D76B815A84C2C91C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. OSTRANDER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4419 PARK GREEN CT
 City SACRAMENTO State CA Zip Code 95821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A29BBB4754DE748AE983
 Amount of Each Receipt this Period 50.00
 Memo Item

C. OSWALD, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10104 VANDERBILT CIRCLE
 City ROCKVILLE State MD Zip Code 20850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A4982CBEAACC34281BF7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1596 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OTERO, VICTOR, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 HARTMAN RD.
 City NEWTON CENTER State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AB613EDAEBF054FDBB2/
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. OTERO, VICTOR, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 HARTMAN RD.
 City NEWTON CENTER State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : AC528C47AD1224CBE990
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. OTTEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 300
 City LYONS State WI Zip Code 53148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A63C016C0504146B6A36
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1597 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OTTEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 300

City LYONS	State WI	Zip Code 53148
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : AA159203299AD4B3FB92

Amount of Each Receipt this Period
25.00

Memo Item

B. OTTEN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 300

City LYONS	State WI	Zip Code 53148
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A95C47E7D0E3D4581B8B

Amount of Each Receipt this Period
25.00

Memo Item

C. OVERLY, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5251 LAKEMONT LANE

City GARDEN CITY	State ID	Zip Code 83714
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : ABC84D5A21EB74E208DF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1598 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OVERLY, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5251 LAKEMONT LANE
 City GARDEN CITY State ID Zip Code 83714
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2021
Transaction ID : AE08153235BFA405ABF6
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. OVERSTREET, PATSY, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58079 DOW TRAIL
 City HANNIBAL State MO Zip Code 63401
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A438EA7E79A684A0B81D
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. OVIES, MANUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 480 CRAB CREEK RD
 City HENDERSONVILLE State NC Zip Code 28739
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021
Transaction ID : A3513306D675F4A68837
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1599 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OWENS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 23558
 City OVERLAND PARK State KS Zip Code 66283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A16FC8EA03D5E427E93A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. OWENS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 23558
 City OVERLAND PARK State KS Zip Code 66283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A1BB62705356F4C10BA1
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PADES, MAX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2758 KELLY STREET
 City LIVERMORE State CA Zip Code 94551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) SR. SPECIALIST DATA CENTER MAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A8C60889B05A74393A59
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1600 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PADILLA, WILLIAM, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1629 NA
 City DORADO State PR Zip Code 00646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AD09E64E11866442B921
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PAGAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2526 KOMO MAI DR
 City PEARL CITY State HI Zip Code 96782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A63C7229D3ED44927B0B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PALENAPA, DONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 NOYACK WAY
 City SACRAMENTO State CA Zip Code 95835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JLL Occupation (for Individual) INDUSTRIAL MAINTENANCE TECHNIK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A0BF0CBB50C194B7B926
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1601 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PALENAPA, DONNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5383 NOYACK WAY
 City SACRAMENTO State CA Zip Code 95835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JLL Occupation (for Individual) INDUSTRIAL MAINTENANCE TECHNI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A1171D36E1C464822B79
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PALMER, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3754 GRAPE AVE NE
 City GRAND RAPIDS State MI Zip Code 49525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A23C635065E894A62AED
 Amount of Each Receipt this Period 25.00
 Memo Item

C. PALMER, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 NORTH STREET
 City BEAUFORT State SC Zip Code 29902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AC8228FEC07FE4573A14
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1602 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PALMER, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 ALMA CT
 City MARION State SC Zip Code 29571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A8F6E8F45AB6B4CBB9DC
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. PALMER, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 ALMA CT
 City MARION State SC Zip Code 29571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A20C3345E3555430B847
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PANDOLFO, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 LOVELL DR
 City WANAQUE State NJ Zip Code 07465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2021
Transaction ID : A460EF76BE6CD400FB62
 Amount of Each Receipt this Period
 225.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1603 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PANEBIANCO, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8832 7TH AVE
 City BROOKLYN State NY Zip Code 11228-3505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A7AEDAIEFF5D5E4DD5AFI
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PARAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11305 WACOMOR DR
 City GERMANTOWN State MD Zip Code 20876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROWN CARPET CARE INC. Occupation (for Individual) SMALL BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AEF4A922B9CC1464E8AD
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PARKER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5661 N SUNSET LN
 City BRAZIL State IN Zip Code 47834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : AE62BE1E38C984360B41
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1604 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PARKER, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5661 N SUNSET LN
 City BRAZIL State IN Zip Code 47834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 05 / 2021
Transaction ID : A13432B9E49604F64997
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PARKER, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 580 LAKE LANE
 City HEBER SPRINGS State AR Zip Code 72543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 26 / 2021
Transaction ID : A1ABC8CC80F8645A99F2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PARKER, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 580 LAKE LANE
 City HEBER SPRINGS State AR Zip Code 72543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 26 / 2021
Transaction ID : A7C63FFC241C2472181F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1605 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2021
Transaction ID : A15DAF8F256BB44C4835
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 CORVO CRISTA
 City ALTO State NM Zip Code 88312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2021
Transaction ID : AA936F9F9D9864B5A8F4
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2021
Transaction ID : AD6EB0A1B7DD04EAF828
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1606 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A33982143B09548AC8CF
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 CORVO CRISTA
 City ALTO State NM Zip Code 88312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : AAA41713E786B4C1E841
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : A838712849F77470EB2A
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1607 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : ACBCBA9F1F9EB46F0A4I
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : AFFD8C069F5364E3FAD6
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A83DDEFEE64F64BD18DE
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1608 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PARKS, MARTHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 W LANCASTER AVE
 10001
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A8DD493918F454F95ACF
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PARMENTER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 328
 City ODESSA State NY Zip Code 14869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARMENTER INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AA87C5E6BD7C5400EA5B
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PARMENTER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 328
 City ODESSA State NY Zip Code 14869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARMENTER INC Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A294F258FBCF145E1A01
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1609 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PASQUAROSA, DOMINIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 BROOKBEND WAY W
 City EAST BRIDGEWATER State MA Zip Code 02333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **03 / 01 / 2021**
Transaction ID : A7741BB6893A74E46A5C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PASSEN, SELVIN, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 LAKESHORE BLVD
 City ZEPHYR COVE State NV Zip Code 89448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 18 / 2021**
Transaction ID : A189576EA07494337B55
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PASSEN, SELVIN, , , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 LAKESHORE BLVD
 City ZEPHYR COVE State NV Zip Code 89448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 18 / 2021**
Transaction ID : A86DCCD57E5C742748CB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1610 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PASTRELL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6120 MAE ANNE #3
 City RENO State NV Zip Code 89523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DAVID L. PASTRELL, DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A275151B66F264D5FB70
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PATAK, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 OWL CREEK DR
 City POWDER SPRINGS State GA Zip Code 30127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATAK MEAT PRODUCTS INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A0E206BBAD2C34E13AB6
 Amount of Each Receipt this Period 250.00
 Memo Item

C. PATE, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 584 FARRINGDOM STREET
 City LUMBERTON State NC Zip Code 28358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 29 / 2021
Transaction ID : ADA9ADC2EBB094AFDA4I
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 385.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1611 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PATE, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 584 FARRINGDOM STREET
 City LUMBERTON State NC Zip Code 28358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AE6A5D9907FA64BA78CD
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PATE, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 584 FARRINGDOM STREET
 City LUMBERTON State NC Zip Code 28358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A2DE409D2B8C745FBA9A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PATE, FLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 584 FARRINGDOM STREET
 City LUMBERTON State NC Zip Code 28358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AF97C7227349F4A788FB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1612 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PATTERSON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 DELMAR AVE
 City PENRYN State CA Zip Code 95663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 01 / 22 / 2021
Transaction ID : AA30BEE9CF1C74A8FA6C
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PATTERSON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 DELMAR AVE
 City PENRYN State CA Zip Code 95663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 02 / 22 / 2021
Transaction ID : A84B7C807DC364209984
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. PATTERSON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 DELMAR AVE
 City PENRYN State CA Zip Code 95663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 03 / 22 / 2021
Transaction ID : A38E6872FB60446E0959
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1613 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PATTERSON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 DELMAR AVE
 City PENRYN State CA Zip Code 95663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A65E2435A8EA4403696D
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PATTERSON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 DELMAR AVE
 City PENRYN State CA Zip Code 95663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : ACCB66A8A82FB4CE3971
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. PATTERSON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 DELMAR AVE
 City PENRYN State CA Zip Code 95663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AE9B3B3A81981473984E
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1614 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PATTERSON, IRENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 636 W COLCHESTER DR
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A6ECA78005C9747AA931
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PATTERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6735 CORTE TERCERA
 City MARTINEZ State CA Zip Code 94553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATTERSON LIFT TRUCKS Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2021
Transaction ID : A2E269D7B03F74990AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PATTERSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6735 CORTE TERCERA
 City MARTINEZ State CA Zip Code 94553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PATTERSON LIFT TRUCKS Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A28185A045ACD4DABAE8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1615 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PATTERSON, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1174 OAK AVE
 City CLOVIF State CA Zip Code 93611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AFD69AC55F823458E94D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. PATTERSON, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1174 OAK AVE
 City CLOVIF State CA Zip Code 93611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A4ECCA4A1EB53486BAE9
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PAULY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 LAKE SHORE DR
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A66594D851C2447D19AF
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1616 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PAULY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 LAKE SHORE DR
 City MANDEVILLE State LA Zip Code 70471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A9E279E7185384073BC3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PAVLINA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 CLARMONT ROAD
 City WILLOWICK State OH Zip Code 44095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPURSEALY MATTRESS COMPANY Occupation (for Individual) COMPUTER SYSTEMS SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A29CF3D4ED70F4CDABE6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PAVLINA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 CLARMONT ROAD
 City WILLOWICK State OH Zip Code 44095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPURSEALY MATTRESS COMPANY Occupation (for Individual) COMPUTER SYSTEMS SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 26 / 2021
Transaction ID : A6CC936930A884DC0B0B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1617 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PAVLINA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 CLARMONT ROAD
 City WILLOWICK State OH Zip Code 44095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPURSEALY MATTRESS COMPANY Occupation (for Individual) COMPUTER SYSTEMS SPECIALIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A4F75A3C2EA7B4075AAE
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PAWLUCH, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5740 WHITE LINE RD
 City AYDEN State NC Zip Code 28513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : AC4535A9A364B4C18AB8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PAWLUCH, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5740 WHITE LINE RD
 City AYDEN State NC Zip Code 28513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A3BA49513597A42B8A28
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1618 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PAYNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 MAIN STREET
 City BANDERA State TX Zip Code 78003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : ADC5E423D8BE14997BB4
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. PAYNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 MAIN STREET
 City BANDERA State TX Zip Code 78003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A2C318786232F492285F
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. PAYNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 MAIN STREET
 City BANDERA State TX Zip Code 78003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A7AC252F757034453880
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1619 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PAYNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 MAIN STREET
 City BANDERA State TX Zip Code 78003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A088BFA62D8394937817
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. PAYNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 NE 114TH CIRCLE
 City VANCOUVER State WA Zip Code 98662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VSNA, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A07795C4B897C450E82B
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PAYNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 NE 114TH CIRCLE
 City VANCOUVER State WA Zip Code 98662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VSNA, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A124546CAC7AD4914870
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1620 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PAYNE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 NE 114TH CIRCLE
 City VANCOUVER State WA Zip Code 98662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VSNA, LLC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A97EE14BFCECA41D99B6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PAYNE, LOIS, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6701 CHESTER AVE APT 148
 City JACKSONVILLE State FL Zip Code 32217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A53E24C9A2AD04BEF80B
 Amount of Each Receipt this Period 75.00
 Memo Item

C. PEACOCK, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2210 MYRTLE RD
 City DIANA State TX Zip Code 75640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AEP Occupation (for Individual) POWER PLANT OPERATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2021
Transaction ID : A00D0E36F8FE54E8C8E0
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1621 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEACOCK, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2210 MYRTLE RD
 City DIANA State TX Zip Code 75640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AEP Occupation (for Individual) POWER PLANT OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A261F8897E955453EAD4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PEAK, SHARON, K., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1051 SE 750
 City DEEPWATER State MO Zip Code 64740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A4026BD29A1AA473C9E6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PEAK, SHARON, K., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1051 SE 750
 City DEEPWATER State MO Zip Code 64740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A18926EC4116548C9AB6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1622 OF 3012				
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEAK, SHARON, K., MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1051 SE 750

City DEEPWATER	State MO	Zip Code 64740
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021

Transaction ID : AF8DB0A3007D64F2CBBE

Amount of Each Receipt this Period
100.00

Memo Item

B. PEAK, SHARON, K., MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1051 SE 750

City DEEPWATER	State MO	Zip Code 64740
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021

Transaction ID : A9C2C96793FA24456BB1

Amount of Each Receipt this Period
100.00

Memo Item

C. PEARCE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1320 KNOLL RD

City REDLANDS	State CA	Zip Code 92373
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US AIR FORCE SERVICES	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021

Transaction ID : A90C93B4E662440A986B

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1623 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEARCY, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 N CALVIN PARK BLVD
 City ROCKFORD State IL Zip Code 61107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A33558FFC807D4043B8D
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. PEAT, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 82058
 City VANCOUVER State WA Zip Code 98682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A73AFFEFFF12E48FC961
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PEAT, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 82058
 City VANCOUVER State WA Zip Code 98682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : AFB4739ED6D7D444CAB4
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1624 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEDDY, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3813 CONFIDENCE DRIVE
 City KELLER State TX Zip Code 76244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALEM MEDIA GROUP - 94..9 KLTY-FM - DA Occupation (for Individual) WEBMASTER/GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : A65EAF314C8594F9CBE2
 Amount of Each Receipt this Period 45.00
 Memo Item

B. PEDDY, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3813 CONFIDENCE DRIVE
 City KELLER State TX Zip Code 76244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALEM MEDIA GROUP - 94..9 KLTY-FM - DA Occupation (for Individual) WEBMASTER/GRAPHIC DESIGNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A8BBF68DB500D45B4A0A
 Amount of Each Receipt this Period 45.00
 Memo Item

C. PEDERSEN, PIRKKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 SO OCEAN BLVD 201
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 25 / 2021**
Transaction ID : ACD541BABB99848F9B16
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 140.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1625 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEDERSEN, PIRKKO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2560 SO OCEAN BLVD
 201
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2021
Transaction ID : AC8656ABA4D6F48F7AA7
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. PEEK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2583 NORTH HIGHWAY 83
 City FRANKTOWN State CO Zip Code 80116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : ABBB660C327F040A6BBA
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. PEEL, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 WOODMONT BLVD
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A045E234289C5463CBD7
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1626 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEEL, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 WOODMONT BLVD
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : AA01D156D46804632B26
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PEEL, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 WOODMONT BLVD
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AD2251C91AF24474D990
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PEEL, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 WOODMONT BLVD
 City NASHVILLE State TN Zip Code 37215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A9892C093B0AD452DA0F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1627 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEERY, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4384 W 12240 S
 City PAYSON State UT Zip Code 84651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.75

Date of Receipt 06 / 15 / 2021
Transaction ID : A9918F229E3D842A98F1
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PELLEGRINO, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 SOMERSET PL
 City RUSTBURG State VA Zip Code 24588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A7713EA38B96D47BD81E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PELLEGRINO, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 SOMERSET PL
 City RUSTBURG State VA Zip Code 24588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2021
Transaction ID : ADA91CA8E68CD4C5A91C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1628 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PELLEGRINO, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 SOMERSET PL
 City RUSTBURG State VA Zip Code 24588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AE5CB9795EF564B84961
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PELLEGRINO, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 SOMERSET PL
 City RUSTBURG State VA Zip Code 24588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AFCB5DDF7EF22443BABB
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PELLERIN, LISA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 783 FORBED RD
 City SARRANC State NY Zip Code 12981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2021
Transaction ID : ADCE6826ED01044A3B1E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1629 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PELLERIN, LISA, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 783 FORBED RD

City SARRANC	State NY	Zip Code 12981
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2021

Transaction ID : A1CF6366C91C04FA4AD7

Amount of Each Receipt this Period
100.00

Memo Item

B. PELLERIN, LISA, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 783 FORBED RD

City SARRANC	State NY	Zip Code 12981
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2021

Transaction ID : A895A06287C8540E6AA1

Amount of Each Receipt this Period
100.00

Memo Item

C. PELLERIN, LISA, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 783 FORBED RD

City SARRANC	State NY	Zip Code 12981
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

Transaction ID : ADDAB3429E78740C3894

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1630 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PELOWITZ, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 KIMBERLY LN
 City LOS ALAMOS State NM Zip Code 87547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A25F90260E9F440E6817
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PELOWITZ, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 KIMBERLY LN
 City LOS ALAMOS State NM Zip Code 87547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A3C8D982D54764A00886
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PEMBERTON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1332 SCOTSBURY CIR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2021
Transaction ID : A74E0F42B77E34DA990C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1631 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEMBERTON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1332 SCOTSBURY CIR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 07 / 2021
Transaction ID : AAE5D6FF2F0C844598E1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PENDERGRAFT, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20901 S 103 E AVE
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A670CF6BF1F7F4A1EA7D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PENDERGRAFT, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20901 S 103 E AVE
 City BIXBY State OK Zip Code 74008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A2E7A07FC0BA148EDB3A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1632 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PENNINGTON, C ARLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 E 5TH ST
 City COLBY State KS Zip Code 67701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DILLONS Occupation (for Individual) BAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.50

Date of Receipt 05 / 19 / 2021
Transaction ID : A7D50DA0039CC44CC990
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PENNINGTON, C ARLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 E 5TH ST
 City COLBY State KS Zip Code 67701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DILLONS Occupation (for Individual) BAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.50

Date of Receipt 06 / 19 / 2021
Transaction ID : A2BDD110DB80F477DBF3
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PENNY, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 37159
 City RALEIGH State NC Zip Code 27627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 29 / 2021
Transaction ID : AD7BE99F91EAE4D24A13
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1633 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PENNY, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 37159
 City RALEIGH State NC Zip Code 27627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A65F73D85B9D8486B888
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. PENNY, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 37159
 City RALEIGH State NC Zip Code 27627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A2F2378107C854A42A9A
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PENNY, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 37159
 City RALEIGH State NC Zip Code 27627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A2A758EAA1AA6407A9DB
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1634 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEREA, DOLORES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 N F ST
 APT. 260
 City OXNARD State CA Zip Code 93030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A7F44B2C16FC14D408CA
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PERETH, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 CLOVER LANE
 City FORT WORTH State TX Zip Code 76107-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DURANGO DOORS OF DFW Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A7FA942061C1F4E8593D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PEREZ, CARLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 NE 174TH ST
 City MIAMI State FL Zip Code 33162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITED STATES POSTAL SERVICE Occupation (for Individual) SUPERVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 04 / 01 / 2021
Transaction ID : AB1783F08A7644C8F9FD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1635 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PERKINS, DAVID, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 BILL SMITH RD
 City TRUSSVILLE State AL Zip Code 35173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MUSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : AF32FA01390AD4DB6806
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PERREAULT, LAWRENCE, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 TASCOSA DR SE
 City HUNTSVILLE State AL Zip Code 35802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **06 / 04 / 2021**
Transaction ID : A493B61214A554FE5A6B
 Amount of Each Receipt this Period 25.00
 Memo Item

C. PERRY, LAMAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1277 PERRY RD
 City LAKE PROVIDENCE State LA Zip Code 71254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 27 / 2021**
Transaction ID : A2CF6CDF742FE41A696C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1636 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PERRY, LAMAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1277 PERRY RD

City LAKE PROVIDENCE	State LA	Zip Code 71254
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2021

Transaction ID : A95DFE90CAB5D4234997

Amount of Each Receipt this Period
300.00

Memo Item

B. PERRY, LAMAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1277 PERRY RD

City LAKE PROVIDENCE	State LA	Zip Code 71254
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : A7A6AE38802A5488F996

Amount of Each Receipt this Period
100.00

Memo Item

C. PERRY, LAMAR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1277 PERRY RD

City LAKE PROVIDENCE	State LA	Zip Code 71254
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2021

Transaction ID : AE6D5DCF3AB5942A1A67

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1637 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PERRY, LAMAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1277 PERRY RD
 City LAKE PROVIDENCE State LA Zip Code 71254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A6978CC40B03744E5A5C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PERRYMAN, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 453
 City BURTON State TX Zip Code 77835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A733A78DB255D4718836
 Amount of Each Receipt this Period 500.00
 Memo Item

C. PERRYMAN, GLENDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 453
 City BURTON State TX Zip Code 77835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) HORSE OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A470E84397E114BBAA05
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1638 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PESTLE, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7805 LYDIA LANE
 City LAFAYETTE State IN Zip Code 47909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A384E0DF6EA8F4265ACC
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PETERMANN, MICHAEL, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5891 U S HIGHWAY 49
 City HATTIESBURG State MS Zip Code 39401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2021
Transaction ID : AA47470F03D0E42C4B7D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETERMANN, MICHAEL, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5891 U S HIGHWAY 49
 City HATTIESBURG State MS Zip Code 39401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A890FB123D0B54107AA1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1639 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETERS, ANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 285 BURNS RD
 City COLUMBUS State MS Zip Code 39702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A89FDE70386BB4EC28C8
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PETERS, CAROLANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ENTERPRISE AVE 1018
 City LEAGUE CITY State TX Zip Code 77573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAY AREA COUNCIL ON DRUGS AND ALCOHOL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2021
Transaction ID : AB160375AB2A84C968B1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETERS, CAROLANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 ENTERPRISE AVE 1018
 City LEAGUE CITY State TX Zip Code 77573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAY AREA COUNCIL ON DRUGS AND ALCOHOL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AFAC7FA0EF272439E985
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1640 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETERS, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 ANDERSON FERRY RD
 City CINCINNATI State OH Zip Code 45238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST ELIZABETH HEALTHCARE Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A37A2F48B88BF4D91B27
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PETERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1825 MT. AVE. NO.1
 City BLACK EAGLE State MT Zip Code 59414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A913C9B914C944378BFA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1825 MT. AVE. NO.1
 City BLACK EAGLE State MT Zip Code 59414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AEB5159989CF74617A85
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1641 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETERSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1267 S VERMILLION DR
 City KANAB State UT Zip Code 84741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : A50B793B05BB54FC298B
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. PETERSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1267 S VERMILLION DR
 City KANAB State UT Zip Code 84741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2021
Transaction ID : AAE62F993310E4B6C9EA
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PETERSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1267 S VERMILLION DR
 City KANAB State UT Zip Code 84741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : AD8CA3037D0AA41FA9D2
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1642 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETERSEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1267 S VERMILLION DR
 City KANAB State UT Zip Code 84741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 04 / 2021**
Transaction ID : A00E29F7B30ED45F3B82
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 337 S JOHNSON STREET
 City CARNEYS POINT State NJ Zip Code 08069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) TECHNICAL SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **03 / 24 / 2021**
Transaction ID : A910FCAC904E547CBAED
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PETERSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 337 S JOHNSON STREET
 City CARNEYS POINT State NJ Zip Code 08069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AT&T Occupation (for Individual) TECHNICAL SUPPORT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 21 / 2021**
Transaction ID : ADA84CD31D1CD40CA903
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1643 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETERSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 S JOHNSON STREET

City CARNEYS POINT	State NJ	Zip Code 08069
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AT&T	Occupation (for Individual) TECHNICAL SUPPORT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2021

Transaction ID : A957FB0C0C1F44C66919

Amount of Each Receipt this Period
35.00

Memo Item

B. PETRILLA, KELLY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4747 STATE ROUTE 66

City APOLLO	State PA	Zip Code 15613
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KISKI AREA SCHOOL DISTRICT	Occupation (for Individual) ADMINISTRATIVE ASSISTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2021

Transaction ID : A82B984D5ED354530B3A

Amount of Each Receipt this Period
35.00

Memo Item

C. PETTIGREW, RODMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 156 GARDEN GATE DRIVE

City PONTE VEDRA BEACH	State FL	Zip Code 32082
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHENEY BROTHERS INC.	Occupation (for Individual) DISTRICT SALES MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2021

Transaction ID : A22FBBAAC8B3F41E6ACF

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1644 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETTIGREW, RODMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 GARDEN GATE DRIVE
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHENEY BROTHERS INC. Occupation (for Individual) DISTRICT SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A135B2C7AAFB64E8085D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PETTIT, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3080 INDIAN HILLS DRIVE
 City MARIETTA State GA Zip Code 30068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGHLAND CAPITAL BROKERAGE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A2D2F292651CA4E2C8B2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETTIT, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3080 INDIAN HILLS DRIVE
 City MARIETTA State GA Zip Code 30068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGHLAND CAPITAL BROKERAGE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A0656BB075E1E41BE82C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1645 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETTIT, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8061 OLD HAGERSTOWN RD
 City MIDDLETOWN State MD Zip Code 21769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A50F8F2662B7B4C9BA72
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A5CAD57CD6EA247D88FD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A0C4CEDF2D86B49B4BD2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1646 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : AD32B20C740D64EC780D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : AF94A6F3E3E034635883
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A5867901DA2F649CCAA3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1647 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A7A1BBB8C51C44119B21
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A80B13BFE7EF9470BA90
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETTRY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ANTLER POINT COURT
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : A11A85A03FCEC40FC9E1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1648 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETTY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 349 HEBRON CHURCH RD
 City WINSTON SALEM State NC Zip Code 27107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AC5B8F6EAE75C496B9D6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PFEFFERKORN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9777 AMADOR RANCH AVE
 City LAS VEGAS State NV Zip Code 89149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 06 / 2021
Transaction ID : A13DD9445E30A444BAB0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PFEFFERKORN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9777 AMADOR RANCH AVE
 City LAS VEGAS State NV Zip Code 89149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 11 / 2021
Transaction ID : AAC376F4B45EA42FD969
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1649 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PFEFFERKORN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9777 AMADOR RANCH AVE
 City LAS VEGAS State NV Zip Code 89149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **305.00**

Date of Receipt **03 / 20 / 2021**
Transaction ID : A1FA58757DEB44447978
 Amount of Each Receipt this Period **35.00**
 Memo Item

B. PFEFFERKORN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9777 AMADOR RANCH AVE
 City LAS VEGAS State NV Zip Code 89149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **355.00**

Date of Receipt **04 / 06 / 2021**
Transaction ID : AC8DDAC060F68499AA36
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. PFEFFERKORN, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9777 AMADOR RANCH AVE
 City LAS VEGAS State NV Zip Code 89149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **04 / 20 / 2021**
Transaction ID : AED3C792E3B434983A73
 Amount of Each Receipt this Period **35.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1650 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILBRICK, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2226 MELROSE
 City ANN ARBOR State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONLIN MCKENNEY & PHILBRICK PC Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2021
Transaction ID : A30A01E8DE4CD42758AF
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PHILBRICK, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2226 MELROSE
 City ANN ARBOR State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONLIN MCKENNEY & PHILBRICK PC Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2021
Transaction ID : AFAE2A27E9FAE4583B83
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. PHILBRICK, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2226 MELROSE
 City ANN ARBOR State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONLIN MCKENNEY & PHILBRICK PC Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : ADCDF3645A96E4E62A92
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1651 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILBRICK, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2226 MELROSE
 City ANN ARBOR State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONLIN MCKENNEY & PHILBRICK PC Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A2D9FCF1CBA1A449E81D
 Amount of Each Receipt this Period 250.00
 Memo Item

B. PHILBRICK, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2226 MELROSE
 City ANN ARBOR State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONLIN MCKENNEY & PHILBRICK PC Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AA8DDA35027A740B5859
 Amount of Each Receipt this Period 250.00
 Memo Item

C. PHILBRICK, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2226 MELROSE
 City ANN ARBOR State MI Zip Code 48104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONLIN MCKENNEY & PHILBRICK PC Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A6E6186B7AA52493784D
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1652 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILLIPS, CLEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1381 LLOYDS COVE RD.
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 20 / 2021**
Transaction ID : A5FD7DB04A1FA4554BE1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PHILLIPS, CLEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1381 LLOYDS COVE RD.
 City TALLAHASSEE State FL Zip Code 32312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 20 / 2021**
Transaction ID : A805A5396D4EA4FA6899
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PHILLIPS, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 486 LAGOON DRIVE
 City OVIEDO State FL Zip Code 32765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 19 / 2021**
Transaction ID : A0B5B8C08CA804D19BD7
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1653 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILLIPS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 SOUTHWATCH LANE
 City MECHANICSBURG State PA Zip Code 17050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AA8ADB9FB5EFF440899B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PHILLIPS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11321 DERRINGER CIRCLE S
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A63FDFFF482004F6088A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PHILLIPS, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11321 DERRINGER CIRCLE S
 City JACKSONVILLE State FL Zip Code 32225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A20AB16C4875441F5A69
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1654 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILLIPS, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 S 6TH STREET
 City KINGFISHER State OK Zip Code 73750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2021
Transaction ID : A753DB308C4C7431C92F
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. PHILLIPS, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 S 6TH STREET
 City KINGFISHER State OK Zip Code 73750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2021
Transaction ID : A06F84F40BE1242A39CA
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PHILLIPS, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 S 6TH STREET
 City KINGFISHER State OK Zip Code 73750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : A06C9AFE634D246408D7
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1655 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILLIPS, SUZANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 528 NW 39TH STREET

City OKLAHOMA CITY	State OK	Zip Code 73118
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) REXWOOD CORPORATION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2021

Transaction ID : ACFD9745886604B3BB5C

Amount of Each Receipt this Period
35.00

Memo Item

B. PHILLIPS, TONEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 HARDEE DRIVE

City SAVANNAH	State GA	Zip Code 31406
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLBY ENTERPRISES INC	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : AE3CA08B35EDC45F49DE

Amount of Each Receipt this Period
35.00

Memo Item

C. PHIPPS, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42001 GAINSLEY DRIVE

City STERLING HEIGHTS	State MI	Zip Code 48313-2557
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HENRY FORD MACOMB	Occupation (for Individual) NURSE
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	13	/	2021

Transaction ID : A518170CA400341A294C

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1656 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PICCOLO, BETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 PAUL REVERE DR.
 City FOREST State VA Zip Code 24551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AD95456635C504D63A9F
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. PICKLES, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 TRAYLEE DR
 City WAKE FOREST State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : A83A7BFF66076433FBAC
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PICKLES, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 TRAYLEE DR
 City WAKE FOREST State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2021
Transaction ID : A94E7CD5DF668497B8B2
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1657 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PICKLES, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 TRAYLEE DR
 City WAKE FOREST State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A96C53CDD507F404C918
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. PICKLES, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 TRAYLEE DR
 City WAKE FOREST State NC Zip Code 27587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : AB94D09F80DF1462381C
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PICKLES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1016
 219 HERMAN TRAIL
 City POCAHONTAS State AR Zip Code 72455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A80D8BBCE9F714728BBD
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1658 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PIEDMONT, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 SIRRON AVE.
 City RICHLAND State WA Zip Code 99352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A58B3AD7301F9445C820
 Amount of Each Receipt this Period 40.00
 Memo Item

B. PIERCE, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 2ND AVE NE
 City EPHRATA State WA Zip Code 98823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A90159F156292458EB05
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PIERRE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3364 KENDALL LOOP
 City ANCHORAGE State AK Zip Code 99507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC ARTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2021
Transaction ID : AAF5F4F5595B44E2091C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1659 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PIERRE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3364 KENDALL LOOP
 City ANCHORAGE State AK Zip Code 99507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : ABEF7A58FC5204F95B0C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PIERRE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3364 KENDALL LOOP
 City ANCHORAGE State AK Zip Code 99507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GRAPHIC ARTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **06 / 27 / 2021**
Transaction ID : A4E52F22002C94F58AEC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PIERSON, JEFFREY, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 HEXHAM
 City IRVINE State CA Zip Code 92603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNITEX MANAGEMENT CORP. Occupation (for Individual) REAL ESTATE DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 21 / 2021**
Transaction ID : ACA69FF2AE0A94524837
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1660 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PILCHER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BLUE DIAMOND DRIVE
 City MISSOURI CITY State TX Zip Code 77489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : AEA316DDB58744F4F984
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PILCHER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BLUE DIAMOND DRIVE
 City MISSOURI CITY State TX Zip Code 77489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : AC1718299F0DF4F73AF8
 Amount of Each Receipt this Period 25.00
 Memo Item

C. PILCHER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BLUE DIAMOND DRIVE
 City MISSOURI CITY State TX Zip Code 77489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : AF0C8019157494DE0B6D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1661 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PILCHER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BLUE DIAMOND DRIVE
 City MISSOURI CITY State TX Zip Code 77489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : AEE6389C25CE947738D3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. PILCHER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BLUE DIAMOND DRIVE
 City MISSOURI CITY State TX Zip Code 77489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A39C20610A0C74103B5D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PILCHER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BLUE DIAMOND DRIVE
 City MISSOURI CITY State TX Zip Code 77489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : AA3EDC8F3F0CF4D94B3F
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1662 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PINDERGRAFS, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3375 LINDA MESA WAY
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 16 / 2021**
Transaction ID : A655623A7A820486189F
 Amount of Each Receipt this Period 200.00
 Memo Item

B. PINKERTON, SHELBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 THE BLUFFS # 1
 City BRANSON State MO Zip Code 65616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A84FF3081EE1740B6A61
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PINKHAM, KARA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5295 OAKWOOD CRT
 City ROCKLAND State CA Zip Code 95677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 17 / 2021**
Transaction ID : A76035B999CC54D69AF0
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	435.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1663 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PINKHAM, KARA, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5295 OAKWOOD CRT

City ROCKLAND	State CA	Zip Code 95677
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2021

Transaction ID : A55F8FC58079B421E997

Amount of Each Receipt this Period
200.00

Memo Item

B. PINKHAM, KARA, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5295 OAKWOOD CRT

City ROCKLAND	State CA	Zip Code 95677
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2021

Transaction ID : A3E7E2CBBDA274C88AEC

Amount of Each Receipt this Period
100.00

Memo Item

C. PINKHAM, KARA, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5295 OAKWOOD CRT

City ROCKLAND	State CA	Zip Code 95677
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2021

Transaction ID : A4CCC8507BD654D51920

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1664 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PINKHAM, KARA, L, ,

Mailing Address 5295 OAKWOOD CRT

City ROCKLAND	State CA	Zip Code 95677
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A064EF2F74CBD46299EC

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PINKHAM, KARA, L, ,

Mailing Address 5295 OAKWOOD CRT

City ROCKLAND	State CA	Zip Code 95677
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : AF7BE5D3DA3614E6D8E1

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PINKHAM, KARA, L, ,

Mailing Address 5295 OAKWOOD CRT

City ROCKLAND	State CA	Zip Code 95677
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A694C5E2DBC6D448BAED

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1665 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PINKHAM, KARA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5295 OAKWOOD CRT
 City ROCKLAND State CA Zip Code 95677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A6317E0CBAA91409BBA2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. PIOLI, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1681 ANDOVER LANE
 City SAN JOSE State CA Zip Code 95124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A0C5F748862C94C9E99A
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. PITCAIRN, BEATRICE, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1620 HUNTINGDON RD
 City HUNTINGDON VALLEY State PA Zip Code 19006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2021
Transaction ID : AC0C650FD927E4C18805
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1666 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PIUMA, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 164 GREEN HILL DR.
 City VONORE State TN Zip Code 37885
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : ADCE7E472097947FC8DC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PLANCK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2303 LINDEN AVENUE
 City MIDDLETOWN State OH Zip Code 45044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DURHAM/PETERMANN TRANSPORTATION Occupation (for Individual) SCHOOL BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : ABFD53A73C5E146EAB7C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PLAYTON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2422 ENFIELD GROVE DRIVE
 City SAN ANTONIO State TX Zip Code 78231-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 06 / 2021
Transaction ID : ACB8A27A81D94411A807
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1667 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PLAYTON, GEORGE, , ,

Mailing Address **2422 ENFIELD GROVE DRIVE**

City SAN ANTONIO	State TX	Zip Code 78231-2232
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
03 / 27 / 2021

Transaction ID : A4447D1E3C5D44BDF A3C

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PLAYTON, GEORGE, , ,

Mailing Address **2422 ENFIELD GROVE DRIVE**

City SAN ANTONIO	State TX	Zip Code 78231-2232
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
04 / 06 / 2021

Transaction ID : A94623DB2B6514376AB5

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PLAYTON, GEORGE, , ,

Mailing Address **2422 ENFIELD GROVE DRIVE**

City SAN ANTONIO	State TX	Zip Code 78231-2232
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt
04 / 27 / 2021

Transaction ID : A47F28089479245C39ED

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1668 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PLAYTON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2422 ENFIELD GROVE DRIVE
 City SAN ANTONIO State TX Zip Code 78231-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 27 / 2021
Transaction ID : AF659B07586C341DA97B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PLAYTON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2422 ENFIELD GROVE DRIVE
 City SAN ANTONIO State TX Zip Code 78231-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A65F96F90F57B481A8F2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PLOTTS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 NORTH 50 WEST
 City OREM State UT Zip Code 84058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOREIGN AID VW SERVICE Occupation (for Individual) AUTOMOTIVE REPAIR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A966215C6C707496F994
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1669 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PLOTTS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1012 NORTH 50 WEST
 City OREM State UT Zip Code 84058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOREIGN AID VW SERVICE Occupation (for Individual) AUTOMOTIVE REPAIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AFF1B5C36454445BCB5F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. POLCHER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 BLUE DIAMOND DR.
 City MISSOURI CITY State TX Zip Code 77489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AB53B0B60325C4EC5B41
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PONOMARENKO, OLEG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 MARLIN AVE
 City SAN MATEO State CA Zip Code 94404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BSL INC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A055BEC0909A34986B0B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1670 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PONOMARENKO, OLEG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 MARLIN AVE
 City SAN MATEO State CA Zip Code 94404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BSL INC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ADCFE6FB74C8C4E0B929
 Amount of Each Receipt this Period 50.00
 Memo Item

B. POPA, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8101 E. KRAIL STREET
 City SCOTTSDALE State AZ Zip Code 85250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS POPA& ASSOCIATES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.75

Date of Receipt 04 / 11 / 2021
Transaction ID : A9267C2B9D0154956B2D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. POPA, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8101 E. KRAIL STREET
 City SCOTTSDALE State AZ Zip Code 85250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THOMAS POPA& ASSOCIATES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 258.75

Date of Receipt 04 / 13 / 2021
Transaction ID : AC2219C951181433DA1B
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1671 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POPA, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8101 E. KRAIL STREET

City SCOTTSDALE	State AZ	Zip Code 85250
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THOMAS POPA& ASSOCIATES	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2021

Transaction ID : A9DCA6ADB076344E7AB8

Amount of Each Receipt this Period
35.00

Memo Item

B. POPA, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8101 E. KRAIL STREET

City SCOTTSDALE	State AZ	Zip Code 85250
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THOMAS POPA& ASSOCIATES	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
318.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2021

Transaction ID : ABD7BDDCDC2CD48CE88I

Amount of Each Receipt this Period
25.00

Memo Item

C. POPA, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8101 E. KRAIL STREET

City SCOTTSDALE	State AZ	Zip Code 85250
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THOMAS POPA& ASSOCIATES	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
353.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : A59184A5D34C9455C867

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1672 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POPA, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8101 E. KRAIL STREET

City SCOTTSDALE	State AZ	Zip Code 85250
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THOMAS POPA& ASSOCIATES	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2021

Transaction ID : AD758923082EC47808E3

Amount of Each Receipt this Period
25.00

Memo Item

B. POPE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 112 BLISTER GOLD
P.O. BOX 8823

City HORSESHOE BAY	State TX	Zip Code 78657
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2021

Transaction ID : AF3B823B65D8C4136BBB

Amount of Each Receipt this Period
100.00

Memo Item

C. POPE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 112 BLISTER GOLD
P.O. BOX 8823

City HORSESHOE BAY	State TX	Zip Code 78657
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2021

Transaction ID : AF3F8ED97D8B6448E9F5

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1673 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POPE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 BLISTER GOLD
 P.O. BOX 8823
 City HORSESHOE BAY State TX Zip Code 78657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : AE7790E882C924395A8A
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. POPE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 BLISTER GOLD
 P.O. BOX 8823
 City HORSESHOE BAY State TX Zip Code 78657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A1BB9DB5707044795817
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PORACH, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 KINGFISHER WAY
 City COLONIAL HEIGHTS State VA Zip Code 23834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : ABD06805F57184724941
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1674 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PORCHETTA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 BEVERLY DRIVE
 City HOLMDEL State NJ Zip Code 07733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) GMP CONTRACTING LLC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 27 / 2021
Transaction ID : A224C12E76040400BA02
 Amount of Each Receipt this Period 500.00
 Memo Item

B. PORTER, CORALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9581 CORONADO DR
 City LA GRANGE State CA Zip Code 95329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MT. RETREAT COMPANY Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A7B0754DBD560483DBC2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PORTER, CORALINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9581 CORONADO DR
 City LA GRANGE State CA Zip Code 95329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MT. RETREAT COMPANY Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A1628C744C13247EBA11
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1675 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PORTER, ELIJAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 GARFIELD AVENUE
 City MARQUETTE State MI Zip Code 49855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 18 / 2021**
Transaction ID : A2EFDF5A7E79D4B7AB78
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PORTER, ELIJAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 GARFIELD AVENUE
 City MARQUETTE State MI Zip Code 49855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 18 / 2021**
Transaction ID : A5C4DD9418D6440AD9C4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **05 / 04 / 2021**
Transaction ID : A1C14A94EC3614FC3B66
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1676 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON
 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : ABF6A89FA26EA472BB52
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON
 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021
Transaction ID : A66251E74AA244AF2BF9
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON
 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A872CB6282BE24628A5D
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1677 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON
 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A05FD229C6375457CAF1
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON
 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A7F203688BCBD4790BA6
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON
 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : A1E4020A6DCDC4A468FF
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1678 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PORTER, TONI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703W JEFFERSON
 1
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : A052C0513429D485A88D
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. POSSAIL, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2867 CR 125
 City ARCO State MN Zip Code 56113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A21C5DC579409437BAB6
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. POSSAIL, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2867 CR 125
 City ARCO State MN Zip Code 56113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A58B1B31D31E84D8B9BE
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1679 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POTTER, ADRIENNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7750 GREAT BASIN ROAD
 City RENO State NV Zip Code 89523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ACB2AF7D3D189403091B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. POTTER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13000 SHERBURNE AVE
 City BECKER State MN Zip Code 55308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) T J POTTER TRUCKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2021
Transaction ID : A662000288FA94C5E957
 Amount of Each Receipt this Period 100.00
 Memo Item

C. POTTER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13000 SHERBURNE AVE
 City BECKER State MN Zip Code 55308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) T J POTTER TRUCKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 02 / 2021
Transaction ID : AED9EC6CF6A7F4D8B81E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1680 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POTTER, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13000 SHERBURNE AVE

City BECKER	State MN	Zip Code 55308
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) T J POTTER TRUCKING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : AFEE83C4964C04F79ABA

Amount of Each Receipt this Period
100.00

Memo Item

B. POTTER, TODD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13000 SHERBURNE AVE

City BECKER	State MN	Zip Code 55308
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) T J POTTER TRUCKING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Transaction ID : A3050DACA33604065972

Amount of Each Receipt this Period
100.00

Memo Item

C. POWELL, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4323 SYCAMORE DRIVE

City HAMPSTEAD	State MD	Zip Code 21074
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WOODLAWN CEMETERY	Occupation (for Individual) OFFICE MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : A8201CE045C884BF1B75

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1681 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POWERS, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 WYCOFF WAY
 City MENDHAM State NJ Zip Code 07945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : AD19467CF09F345388AE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. POWERS, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 HARTS MILL ROAD HOPE
 City HOPE State ME Zip Code 04847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUILDER/FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A0BD10416BE0444AC9FD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. POWERS, DENISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 OBSERVATORY ST
 City MANOR State PA Zip Code 15665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXCELA HEALTH Occupation (for Individual) RN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A4A03C494D9F44E5EA4B
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1682 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POWERS, DENISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 OBSERVATORY ST

City MANOR	State PA	Zip Code 15665
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXCELA HEALTH	Occupation (for Individual) RN
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : AE11C2B8285E5402190F

Amount of Each Receipt this Period
25.00

Memo Item

B. PRADO, JORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 630 W VALENCIA MESA DR.

City FULLERTON	State CA	Zip Code 92835
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2021

Transaction ID : A533F291B69FD4134BE9

Amount of Each Receipt this Period
50.00

Memo Item

C. PRADO, JORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 630 W VALENCIA MESA DR.

City FULLERTON	State CA	Zip Code 92835
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2021

Transaction ID : AB2B23F6955A345AF93F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1683 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRATER, BRENT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35603 EW 1170

City SEMINOLE	State OK	Zip Code 74868
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021

Transaction ID : A8C62B27EC6F4459F940

Amount of Each Receipt this Period
50.00

Memo Item

B. PRATER, BRENT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35603 EW 1170

City SEMINOLE	State OK	Zip Code 74868
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021

Transaction ID : AC39E5665C94E4A64AD3

Amount of Each Receipt this Period
50.00

Memo Item

C. PRATT, JOHN, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1479 SW SHORELINE DRIVE

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021

Transaction ID : A66AB737E7644487B960

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1684 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRATT, JOHN, T., ,

Mailing Address 1479 SW SHORELINE DRIVE

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021

Transaction ID : AFFD5790173F54E30B76

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRATT, JOHN, T., ,

Mailing Address 1479 SW SHORELINE DRIVE

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021

Transaction ID : A29AE34D4FE58428A930

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRATT, JOHN, T., ,

Mailing Address 1479 SW SHORELINE DRIVE

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021

Transaction ID : AB9062BCC69F246BE900

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1685 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PREJEAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 FALMOTH DR
 City SHREVEPORT State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED RIVER CV SURGEONS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A03D610E7E7674F1C9EC
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. PREJEAN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 FALMOTH DR
 City SHREVEPORT State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED RIVER CV SURGEONS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A48823231150444D78E1
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PREJEAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1819 PINHOOK ROAD 215
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : A993E62CF5717415EA8D
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1686 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PREJEAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1819 PINHOOK ROAD
 215
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : A8E439865F6F9457284B
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. PREJEAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1819 PINHOOK ROAD
 215
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A03FAAB751A274497B16
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PREJEAN, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1819 PINHOOK ROAD
 215
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A9C0B026BD6924F7E9DB
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1687 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRIBANIC, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3530 TAMORA WAY
 City COLORADO SPRINGS State CO Zip Code 80919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L3HARRIS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A56B6B8C081F84DE68EA
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. PRIBANIC, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3530 TAMORA WAY
 City COLORADO SPRINGS State CO Zip Code 80919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L3HARRIS CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AD44158EE5A8E4559A2D
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PRICE, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2668 GLENDALE
 City GROVE CITY State OH Zip Code 43123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : AA9AB5C871F354D53B53
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1688 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRIFTI, EKTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 OXFORD ST
 City DOWNERS GROVE State IL Zip Code 60516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALPHA CONTRACTORS Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A9E8033E3C8534A5C80A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. PRIMAVERA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3903 N SHADYCREEK DR.
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2021
Transaction ID : A80260556C3D1406088F
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. PRIMAVERA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3903 N SHADYCREEK DR.
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : A3C7A2E03656E4C689E0
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1689 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRIMAVERA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3903 N SHADYCREEK DR.
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 28 / 2021**
Transaction ID : A1341AABC37B248639DF
 Amount of Each Receipt this Period 250.00
 Memo Item

B. PRIMAVERA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3903 N SHADYCREEK DR.
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : AAD955B118C804692A77
 Amount of Each Receipt this Period 250.00
 Memo Item

C. PRIMAVERA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3903 N SHADYCREEK DR.
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : A19E6ED822D96493AA78
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1690 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRIMAVERA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3903 N SHADYCREEK DR.
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AAF71D286F4C34527BAC
 Amount of Each Receipt this Period 250.00
 Memo Item

B. PRINCE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2662 HESKER HILL RD
 City JERSEY SHORE State PA Zip Code 17740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A4B6078DB264B4193A34
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PRINCE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2662 HESKER HILL RD
 City JERSEY SHORE State PA Zip Code 17740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A7CB2694B466A4C5894D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1691 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PROESCHEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5072 MORNING SONG DR
 City MEDINA State OH Zip Code 44256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROE POWER SYSTEMS, LLC Occupation (for Individual) CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 16 / 2021**
Transaction ID : A0CC52CA9699A413B90C
 Amount of Each Receipt this Period 75.00
 Memo Item

B. PROESCHEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5072 MORNING SONG DR
 City MEDINA State OH Zip Code 44256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROE POWER SYSTEMS, LLC Occupation (for Individual) CONSULTING ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 16 / 2021**
Transaction ID : A5D1B3ABBFA4D4BCC9E7
 Amount of Each Receipt this Period 75.00
 Memo Item

C. PROUT, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383F NEPONSET ST 2062
 City NORWOOD State MA Zip Code 02062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : A3AA56E5CED284489833
 Amount of Each Receipt this Period 450.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1692 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PROUT, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383F NEPONSET ST
 2062
 City NORWOOD State MA Zip Code 02062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2021
Transaction ID : A6DB1B9DF491F4A15942
 Amount of Each Receipt this Period
 400.00
 Memo Item

B. PROUT, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383F NEPONSET ST
 2062
 City NORWOOD State MA Zip Code 02062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021
Transaction ID : ADE4225539B0A4FB1998
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. PROZINSKI, CLAUDE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35529 DEER POND LN
 City ROUND HILL State VA Zip Code 20141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : AAA44C2127AE9481DBF3
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1693 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRUETTI, MICHEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5936 HERITAGE LANE
 City STONE MOUNTAIN State GA Zip Code 30087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A328DB7CD5C33438A983
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PRUETT, WILLIAM, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6372 CRESENT LP
 City KEIZER State OR Zip Code 97303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 24 / 2021
Transaction ID : AADA1BDCE58FA4C32873
 Amount of Each Receipt this Period 250.00
 Memo Item

C. PRUETT, WILLIAM, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6372 CRESENT LP
 City KEIZER State OR Zip Code 97303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 24 / 2021
Transaction ID : A16B1D023B7C84C1185A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1694 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRUETT, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13402 S WARPAINT DR
 City PHOENIX State AZ Zip Code 85044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US BORDER PATROL Occupation (for Individual) BORDER PATROL AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : ABC10291D4F72430D81E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PRYOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 WHITE BIRCH CT
 City KNOXVILLE State TN Zip Code 37932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 02 / 23 / 2021
Transaction ID : AD2C463B4668A4FC580D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PRYOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 WHITE BIRCH CT
 City KNOXVILLE State TN Zip Code 37932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 02 / 24 / 2021
Transaction ID : AC29A205418B94C289F9
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1695 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2021

Transaction ID : A308F83E5266D4AE88DE

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2021

Transaction ID : A821C0280D9E34D1EABC

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2021

Transaction ID : ACA5F6C9E1E584C03964

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1696 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2021

Transaction ID : A11774562C200466D9F9

Amount of Each Receipt this Period
35.00

Memo Item

B. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2021

Transaction ID : AA0C05978E8C2489AA10

Amount of Each Receipt this Period
20.00

Memo Item

C. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2021

Transaction ID : A43311AB986464AFAAB4

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1697 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2021

Transaction ID : A37719839BBB749BE958

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2021

Transaction ID : A866F0BBB68B144F4974

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021

Transaction ID : A49FCFD5DF9EE40A6B39

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1698 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2021

Transaction ID : AD730A96546D04808A3C

Amount of Each Receipt this Period
20.00

Memo Item

B. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2021

Transaction ID : AB47EF70811144D3C867

Amount of Each Receipt this Period
25.00

Memo Item

C. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2021

Transaction ID : A0AB119FE952744218D4

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1699 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
565.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2021

Transaction ID : A9A4AFE8B49294ED8BB9

Amount of Each Receipt this Period
25.00

Memo Item

B. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2021

Transaction ID : AFC53686B477B458A841

Amount of Each Receipt this Period
25.00

Memo Item

C. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A26DA8532F6034F48802

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1700 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : A7DB7E19CA9704FB6BC9

Amount of Each Receipt this Period
35.00

Memo Item

B. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A2FBB53A446AF431A9E2

Amount of Each Receipt this Period
20.00

Memo Item

C. PRYOR, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
705.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : A788D136A1FD541ABB94

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1701 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRYOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 WHITE BIRCH CT
 City KNOXVILLE State TN Zip Code 37932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : AEFA3C7F5B4714910B58
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. PRYOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 WHITE BIRCH CT
 City KNOXVILLE State TN Zip Code 37932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021
Transaction ID : A292E4A079AE94A3D98F
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. PRYOR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10306 WHITE BIRCH CT
 City KNOXVILLE State TN Zip Code 37932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : ABBEEAB0F872C4B009D1
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1702 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
810.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021

Transaction ID : ADF39D8FD649F47E58D4

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
830.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021

Transaction ID : AD5429D3F83754942A64

Amount of Each Receipt this Period
20.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRYOR, ROBERT, , ,

Mailing Address 10306 WHITE BIRCH CT

City KNOXVILLE	State TN	Zip Code 37932
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
855.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021

Transaction ID : A482BA9E15F104AC0A5B

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1703 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PUCCI, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 REDBUD CT

City LITTLETON	State NC	Zip Code 27850
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2021

Transaction ID : ACF87C49577904A0C9B1

Amount of Each Receipt this Period
50.00

Memo Item

B. PUCCI, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 127 REDBUD CT

City LITTLETON	State NC	Zip Code 27850
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2021

Transaction ID : A5E144E45F2EF4729B29

Amount of Each Receipt this Period
50.00

Memo Item

C. PUCKETT, RUTH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2905 PINEWOOD DR

City GARLAND	State TX	Zip Code 75044-5973
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOSSIL PARTNERS L P	Occupation (for Individual) PAYROLL ANALYST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2021

Transaction ID : A61AC32F4FA134123A49

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1704 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PUGH, LAWRENCE, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1094 TULIP AVE
 City FRANKLIN SQUARE State NY Zip Code 11010-2745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A2A5580E8F732495C949
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. PUGH, LAWRENCE, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1094 TULIP AVE
 City FRANKLIN SQUARE State NY Zip Code 11010-2745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : AD3AF622110B643BE903
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. PULLEN, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3905 CICADA LANE
 City VENUS State TX Zip Code 76084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A07523C23D9BD4BE4B71
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1705 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PULSINELLE, ARLENE, , ,

Mailing Address 12 DELAFIELD AVE

City LYNDHURST	State NJ	Zip Code 07071
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021

Transaction ID : A65416227E96D4348B4A

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PULSINELLE, ARLENE, , ,

Mailing Address 12 DELAFIELD AVE

City LYNDHURST	State NJ	Zip Code 07071
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021

Transaction ID : A378906135AD3489CAA6

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PUMILLO, LAURA, , ,

Mailing Address 150 CRISFIELD

City YONKERS	State NY	Zip Code 10710
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) DIETITIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021

Transaction ID : AC11B3EE6A6204BAA955

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1706 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PURDOM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 FENDALE ST SE
 City GRAND RAPIDS State MI Zip Code 49548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A0A81FA85502D496FB2E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. PURKS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 CANNON RIDGE DRIVE
 City FREDERICKSBURG State VA Zip Code 22405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SKYQUEST AVIATION Occupation (for Individual) AIRCRAFT TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AFE56BDF3CD9D46F291C
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PUTNAM, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 MANATEE CIR
 City TARPON SPRINGS State FL Zip Code 34689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYMOND JAMES FINANCIAL SERVICES Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A9FE081DF563C4E2EA43
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1707 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PUTNAM, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 MANATEE CIR
 City TARPON SPRINGS State FL Zip Code 34689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RAYMOND JAMES FINANCIAL SERVICES Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : ABD63AF1E6E4F4231A63
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PUTNESS, JACK, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13343 LOVERS LANE RD
 City PRINCETON State IL Zip Code 61356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A65BFCDFD68C445BBB0B
 Amount of Each Receipt this Period 500.00
 Memo Item

C. PUZIO, BONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 VOLCANIC HILL ROAD
 City SUSSEX State NJ Zip Code 07461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A76B127F0D7514E82AAD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1708 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021
Transaction ID : AB7F439EB6F624625869
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021
Transaction ID : A5CA8F857F7F24616863
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. QUALY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 BRENTMOOR PARK
 City CLAYTON State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A3422C13BB3B046AFA86
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1709 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. QUALY, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 BRENTMOOR PARK

City CLAYTON	State MO	Zip Code 63105
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2021

Transaction ID : AB68EFCA1395345E394A

Amount of Each Receipt this Period
100.00

Memo Item

B. QUEEN, EDWINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 594

City SILVERDALE	State WA	Zip Code 98383
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2021

Transaction ID : A452407BC02FD4935911

Amount of Each Receipt this Period
10.00

Memo Item

C. QUEEN, EDWINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 594

City SILVERDALE	State WA	Zip Code 98383
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2021

Transaction ID : AEFA2E0AFFC9C4B56986

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1710 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. QUEEN, EDWINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 594
 City SILVERDALE State WA Zip Code 98383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **05 / 26 / 2021**
Transaction ID : A098680EEB75C4A99A98
 Amount of Each Receipt this Period **10.00**
 Memo Item

B. QUEEN, EDWINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 594
 City SILVERDALE State WA Zip Code 98383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 10 / 2021**
Transaction ID : A1F9A124669F748D2A9C
 Amount of Each Receipt this Period **20.00**
 Memo Item

C. QUEEN, EDWINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 594
 City SILVERDALE State WA Zip Code 98383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **06 / 26 / 2021**
Transaction ID : A25968DA807AC4785866
 Amount of Each Receipt this Period **10.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1711 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. QUEST, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6047 WALNUT HILL CIRCLE
 City DALLAS State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 03 / 25 / 2021
Transaction ID : A97A8A7F4857C4B0AB47
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. QUEST, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6047 WALNUT HILL CIRCLE
 City DALLAS State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 04 / 25 / 2021
Transaction ID : A727BD664C2A64CE3B35
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. QUEST, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6047 WALNUT HILL CIRCLE
 City DALLAS State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) VOLUNTEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 05 / 25 / 2021
Transaction ID : A103BBD127E384BEA9EA
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1712 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. QUINTA, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8029 SW 64 STREET
 City MIAMI State FL Zip Code 33143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A81773D4628BA4C5F9CF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. QUINTA, MARCIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8029 SW 64 STREET
 City MIAMI State FL Zip Code 33143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A6116B9A796994FF7BF5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. QUIRK, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 OAK RIDGE LANE
 City SEWELL State NJ Zip Code 08080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A6C5C3BA68D13419C862
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1713 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. QUIRK, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 OAK RIDGE LANE
 City SEWELL State NJ Zip Code 08080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : A0A31FA33665244B492B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RADEMACHER, BRIAN, D., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4490 148TH AVENUE NORTHWEST
 City ANDOVER State MN Zip Code 55304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RADEMACHER CO. Occupation (for Individual) RETAIL OPERATIONS ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : AF3D50584112D4C9E9C1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RAFFERTY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 HEISER ROAD
 City PORT MURRAY State NJ Zip Code 07865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIS TOWERS WATSON Occupation (for Individual) LEAD CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A8E84E8FA4CFA48A3BF8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1714 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAFFERTY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 HEISER ROAD
 City PORT MURRAY State NJ Zip Code 07865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILLIS TOWERS WATSON Occupation (for Individual) LEAD CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A56F144F2484C4C5092E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RAGASA, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6002 79TH ST CT W
 City HONOLULU State HI Zip Code 96820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A65B581CA5CFC4C6AA1F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2021
Transaction ID : A90EA7A48FE10440A912
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1715 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAINES, CYNTHIA, , ,

Mailing Address **17214 TAMARACK DRIVE**

City **WILLIAMSPORT** State **MD** Zip Code **21795**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
02 / 26 / 2021

Transaction ID : AFE5E3C6C198E4F7798B

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAINES, CYNTHIA, , ,

Mailing Address **17214 TAMARACK DRIVE**

City **WILLIAMSPORT** State **MD** Zip Code **21795**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
02 / 27 / 2021

Transaction ID : A30DBE3A17D3247DFB2B

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAINES, CYNTHIA, , ,

Mailing Address **17214 TAMARACK DRIVE**

City **WILLIAMSPORT** State **MD** Zip Code **21795**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
04 / 28 / 2021

Transaction ID : ABE7FB0CC17274B96835

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1716 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAINES, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17214 TAMARACK DRIVE
 City WILLIAMSPORT State MD Zip Code 21795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A97476FEBA482454C8D1
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 18 / 2021
Transaction ID : AE336ABE9678D4B84A51
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 12 / 2021
Transaction ID : AE917F271972A499D9C2
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1717 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : A6A90971355194F64B41
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A75C4CDA0691B491D880
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : A6785415B84904A7C808
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1718 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 05 / 18 / 2021
Transaction ID : AC63AE0B8D9E94A9F9FD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 05 / 30 / 2021
Transaction ID : AB488A53B17A5477FB53
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RAIOLA, SILVANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6439 BIXBY TERRACE DR.
 City LONG BEACH State CA Zip Code 90815-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANDMARK REALTORS Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 06 / 12 / 2021
Transaction ID : AAEDE2208805F4FOC8DB
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1719 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAKES, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 183
 City FALLON State MT Zip Code 59326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 01 / 04 / 2021
Transaction ID : AE0F0173EDABB40F885E
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. RAKESTRAW, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14783 CRANBERRY COURT
 City NAPLES State FL Zip Code 34114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 29 / 2021
Transaction ID : AEA4E15F04DF447CE805
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. RAMSERRAN, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8281 MORNING DEW CT
 City SPRINGFIELD State VA Zip Code 22153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIMUS Occupation (for Individual) ADM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 06 / 03 / 2021
Transaction ID : A1AF1B6100A6E49CAA24
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1720 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAMSERRAN, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8281 MORNING DEW CT
 City SPRINGFIELD State VA Zip Code 22153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIMUS Occupation (for Individual) ADM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A83014428D0BE49C1989
 Amount of Each Receipt this Period 35.00
 Memo Item

B. RAMSEY, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3011 DODSWORTH DRIVE
 City CRAMERTON State NC Zip Code 28032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRAYING SYSTEMS CO. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 28 / 2021
Transaction ID : A48743E8D751D4E48B1A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RAMSEY, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3011 DODSWORTH DRIVE
 City CRAMERTON State NC Zip Code 28032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRAYING SYSTEMS CO. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A23DC8AFE24794F7E985
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1721 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAMSEY, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3011 DODSWORTH DRIVE
 City CRAMERTON State NC Zip Code 28032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRAYING SYSTEMS CO. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A61F8FBA807E44D5AB8B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RAMSEY, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3011 DODSWORTH DRIVE
 City CRAMERTON State NC Zip Code 28032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRAYING SYSTEMS CO. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : AA85F1F5366704290800
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RAMSEY, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3011 DODSWORTH DRIVE
 City CRAMERTON State NC Zip Code 28032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPRAYING SYSTEMS CO. Occupation (for Individual) SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : AAE7C7AE284EE46CB8FA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1722 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAMSEY, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3011 DODSWORTH DRIVE

City CRAMERTON	State NC	Zip Code 28032
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPRAYING SYSTEMS CO.	Occupation (for Individual) SALES ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : AAC3D4B54D6554288988

Amount of Each Receipt this Period
35.00

Memo Item

B. RAMSEY, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3011 DODSWORTH DRIVE

City CRAMERTON	State NC	Zip Code 28032
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPRAYING SYSTEMS CO.	Occupation (for Individual) SALES ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : A7027E781F2A347FD9E1

Amount of Each Receipt this Period
50.00

Memo Item

C. RAMSEY, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3011 DODSWORTH DRIVE

City CRAMERTON	State NC	Zip Code 28032
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SPRAYING SYSTEMS CO.	Occupation (for Individual) SALES ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : A3748D9ADF2E4455C93C

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1723 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RANDALL, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105
 City CARTERSVILLE State GA Zip Code 30120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEFENSE CONTRACTOR Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **03 / 07 / 2021**
Transaction ID : AE9E57455165A4665A35
 Amount of Each Receipt this Period 75.00
 Memo Item

B. RANDALL, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105
 City CARTERSVILLE State GA Zip Code 30120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEFENSE CONTRACTOR Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 07 / 2021**
Transaction ID : ADD441B5BF4954EF8AC3
 Amount of Each Receipt this Period 75.00
 Memo Item

C. RANDALL, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105
 City CARTERSVILLE State GA Zip Code 30120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEFENSE CONTRACTOR Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **05 / 07 / 2021**
Transaction ID : A0C04AC39D4CD4CA281A
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1724 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RANDALL, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105
 City CARTERSVILLE State GA Zip Code 30120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEFENSE CONTRACTOR Occupation (for Individual) PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **06 / 07 / 2021**
Transaction ID : A1BE5CF6FA2604790998
 Amount of Each Receipt this Period 75.00
 Memo Item

B. RANDOLPH, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 218
 City LINDSEY State OH Zip Code 43442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **03 / 23 / 2021**
Transaction ID : A8EBBC05EB0DB4A76B39
 Amount of Each Receipt this Period 25.00
 Memo Item

C. RANDOLPH, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 218
 City LINDSEY State OH Zip Code 43442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : A93E8ECBB696C4DE3818
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1725 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RANDOLPH, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 218
 City LINDSEY State OH Zip Code 43442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 04 / 23 / 2021
Transaction ID : A3A034547AA87467F870
 Amount of Each Receipt this Period 25.00
 Memo Item

B. RANDOLPH, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 218
 City LINDSEY State OH Zip Code 43442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 05 / 24 / 2021
Transaction ID : ACC91C1BB7FE140459E8
 Amount of Each Receipt this Period 25.00
 Memo Item

C. RANDOLPH, RICHARD, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 218
 City LINDSEY State OH Zip Code 43442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A82B5A57985A54DE7A25
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1726 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAPP, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3780 FOLLETT RUN ROAD
 City WARREN State PA Zip Code 16365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PA HOUSE OF REP Occupation (for Individual) PA LEGISLATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AC2B9123674A8446BB36
 Amount of Each Receipt this Period 35.00
 Memo Item

B. RASCH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 CHATEAUX DU LAC
 City FENTON State MI Zip Code 48430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A04AEFB5BDF984ABBBB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RASH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6972 GOLDEN VALLEY CT
 City FREDERICK State MD Zip Code 21703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A8C5FE2501A674E1E8C9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1727 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RASH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6972 GOLDEN VALLEY CT
 City FREDERICK State MD Zip Code 21703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AAF92654666B74CE3A3A
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. RASMUSSEN, LEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 SPARROW CT
 City FAIRBANKS State AK Zip Code 99709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : AC71F466D78AE4488B01
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. RASMUSSON, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7023 SONNY RIDGE
 City SAN ANTONIO State TX Zip Code 78244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A3A9BEAB6E0C6492A8AB
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1728 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAUCHENBERGER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 MARINERS POINT LN
 City SMITHFIELD State VA Zip Code 23430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTIC COAST PARTNERS, LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **02 / 20 / 2021**
Transaction ID : AED9B60F5A9A64393882
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RAUCHENBERGER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 MARINERS POINT LN
 City SMITHFIELD State VA Zip Code 23430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTIC COAST PARTNERS, LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **03 / 20 / 2021**
Transaction ID : AD86DECD7E201433F99E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RAUCHENBERGER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 MARINERS POINT LN
 City SMITHFIELD State VA Zip Code 23430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTIC COAST PARTNERS, LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **04 / 20 / 2021**
Transaction ID : A167CA6488C5845658E7
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1729 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAUCHENBERGER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 MARINERS POINT LN
 City SMITHFIELD State VA Zip Code 23430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTIC COAST PARTNERS, LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A6E39E216647D4CA8837
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RAUCHENBERGER, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 MARINERS POINT LN
 City SMITHFIELD State VA Zip Code 23430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATLANTIC COAST PARTNERS, LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A3CD77645F73043C4B57
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RAVENSCROFT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2013
 City CAREFREE State AZ Zip Code 85377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 25 / 2021
Transaction ID : A197961E3ABDE4A2D85B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1730 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAVENSCROFT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2013
 City CAREFREE State AZ Zip Code 85377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A34A3BB8A2CA148149C9
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. RAVENSCROFT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2013
 City CAREFREE State AZ Zip Code 85377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : ADD40709726954FDE818
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. RAVSTEN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 ROSEMARY DR
 City CASTLE ROCK State CO Zip Code 80109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A338A781531CE4E73B84
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1731 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAVSTEN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 ROSEMARY DR
 City CASTLE ROCK State CO Zip Code 80109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AEDC5FD976A404696948
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RAY, A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 BECKINGTON
 City DALLAS State TX Zip Code 75287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AF1EC300E7F07413EBED
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RAYES, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 195429
 City DALLAS State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) OIL & GAS INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 26 / 2021
Transaction ID : A45926D06A2E24B22993
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1732 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) OIL & GAS INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2021

Transaction ID : AD699487C050D4EC5BE5

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) OIL & GAS INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2021

Transaction ID : A3E9C94059CA84DBC8CF

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) OIL & GAS INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2021

Transaction ID : AEDB2467B1F404FFC93E

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1733 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) OIL & GAS INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021

Transaction ID : A196CA748FDA1432AADE

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) OIL & GAS INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021

Transaction ID : A10C58F5E476A47ADA72

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS	State TX	Zip Code 75219
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) OIL & GAS INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021

Transaction ID : A90F378623DE747CAB6B

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1734 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS State TX Zip Code 75219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) OIL & GAS INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2021

Transaction ID : AF6A05FF85C914E63AF7

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS State TX Zip Code 75219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) OIL & GAS INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2021

Transaction ID : A90338C583E994C5F999

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RAYES, PATRICK, , ,

Mailing Address P.O. BOX 195429

City DALLAS State TX Zip Code 75219

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) OIL & GAS INVESTMENTS

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
06 / 27 / 2021

Transaction ID : A0DC82287F5584702ADF

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1735 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAY, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8405 23RD AVE N
 City MINNEAPOLIS State MN Zip Code 55427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANSIT TEAM Occupation (for Individual) DRIVER/TRAINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A1F40BC752D0F4483A19
 Amount of Each Receipt this Period 25.00
 Memo Item

B. RAY, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8405 23RD AVE N
 City MINNEAPOLIS State MN Zip Code 55427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRANSIT TEAM Occupation (for Individual) DRIVER/TRAINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A55135CEE76AD460C9D5
 Amount of Each Receipt this Period 15.00
 Memo Item

C. RE, BONNIE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2646 NW 63 PL.
 City BOCA RATON State FL Zip Code 33496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A14D35BCCCC9745B7BD8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1736 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RE, BONNIE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2646 NW 63 PL.
 City BOCA RATON State FL Zip Code 33496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A323F95DFEF8C4468AA0
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. RECTOR, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 LACREEK LN
 City SPRING State TX Zip Code 77379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : ADF56F868C5834A498C0
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. RECTOR, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 LACREEK LN
 City SPRING State TX Zip Code 77379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A909DE58ABD9943158B1
 Amount of Each Receipt this Period
 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1737 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RECTOR, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 LACREEK LN
 City SPRING State TX Zip Code 77379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A1F0D5C244AC144C3AD0
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. RECTOR, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 LACREEK LN
 City SPRING State TX Zip Code 77379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : AC2392C9499A64F73801
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. RECTOR, BILLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 LACREEK LN
 City SPRING State TX Zip Code 77379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AE3BCD4F6131E449E9E8
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1738 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REDDEN, PERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1610 126TH

City LUBBOCK	State TX	Zip Code 79423
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTON ENERGY	Occupation (for Individual) SUPERINTENDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2021

Transaction ID : A5C0DBFE0CB124DC096F

Amount of Each Receipt this Period
35.00

Memo Item

B. REDMAN, SANDEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 WADE RD

City WADESVILLE	State IN	Zip Code 47638
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STENDEBACK FAMILY FUNERAL HOME	Occupation (for Individual) COSMETOLOGIST / OFFICE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	18	/	2021

Transaction ID : A84F5F5B4363A400380C

Amount of Each Receipt this Period
25.00

Memo Item

C. REDMAN, SANDEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 WADE RD

City WADESVILLE	State IN	Zip Code 47638
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STENDEBACK FAMILY FUNERAL HOME	Occupation (for Individual) COSMETOLOGIST / OFFICE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : AEC8399D5086742B98B4

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1739 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REDMAN, SANDEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 WADE RD
 City WADESVILLE State IN Zip Code 47638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STENDEBACK FAMILY FUNERAL HOME Occupation (for Individual) COSMETOLOGIST / OFFICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A631BE50D8C304F129B3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. REDMAN, SANDEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 WADE RD
 City WADESVILLE State IN Zip Code 47638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STENDEBACK FAMILY FUNERAL HOME Occupation (for Individual) COSMETOLOGIST / OFFICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A3D3065D2715F4036B97
 Amount of Each Receipt this Period 25.00
 Memo Item

C. REDMAN, SANDEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 WADE RD
 City WADESVILLE State IN Zip Code 47638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STENDEBACK FAMILY FUNERAL HOME Occupation (for Individual) COSMETOLOGIST / OFFICE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AAEC919101862471F8BB
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1740 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REDMON, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5495 SOUTH FARM ROAD 137
 City SPRINGFIELD State MO Zip Code 65810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AB9B540ADB5C24BC2B3E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. REESE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 MONPONSET STREET S/H
 City HYDE PARK State MA Zip Code 02136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSOURCE ELECTRIC COMPANY Occupation (for Individual) TROUBLESHOOTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : A364B2264978F4BBF8FD
 Amount of Each Receipt this Period 100.00
 Memo Item

C. REESE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 MONPONSET STREET S/H
 City HYDE PARK State MA Zip Code 02136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERSOURCE ELECTRIC COMPANY Occupation (for Individual) TROUBLESHOOTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : AC9EC248831E5403DAD1
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1741 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REESE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6773 ADMIRAL DRIVE
 City MIDLAND State GA Zip Code 31820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : A8F6A5DB594924BF4BC3
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. REESE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6773 ADMIRAL DRIVE
 City MIDLAND State GA Zip Code 31820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2021
Transaction ID : A55418584C5454A10B92
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. REESE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6773 ADMIRAL DRIVE
 City MIDLAND State GA Zip Code 31820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AD4569395C4A94C5E9D7
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1742 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REESE, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6773 ADMIRAL DRIVE
 City MIDLAND State GA Zip Code 31820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AEA074890059A4940926
 Amount of Each Receipt this Period 100.00
 Memo Item

B. REGIER, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23368 E. FLORAL AVE
 City DINUBA State CA Zip Code 93618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : ACE568CF4E3944464BBF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. REGIER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 WISCONSON AVENUE
 City GLADSTONE State MI Zip Code 49837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A4A665E54E6754B2D909
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1743 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REID, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19818 W PALOMA DR.

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2021

Transaction ID : AB152F1BF003E494A9DB

Amount of Each Receipt this Period
100.00

Memo Item

B. REID, VICTORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19818 W PALOMA DR.

City CYPRESS	State TX	Zip Code 77433
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

Transaction ID : A3A307E85825740E79E6

Amount of Each Receipt this Period
100.00

Memo Item

C. REID, WILLIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 68TH ST

City CAPITOL HEIGHTS	State MD	Zip Code 20743
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : A5C86ABEA450B4037BBC

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1744 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REID, WILLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 68TH ST
 City CAPITOL HEIGHTS State MD Zip Code 20743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A9201469F79B24B8B96C
 Amount of Each Receipt this Period 10.00
 Memo Item

B. REID, WILLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 68TH ST
 City CAPITOL HEIGHTS State MD Zip Code 20743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A3235ED525C264BECAAD
 Amount of Each Receipt this Period 10.00
 Memo Item

C. REIF, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 DE LEON DRIVE
 City EL PASO State TX Zip Code 79912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A83A1779CD33741E5BE5
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1745 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 28 / 2021**
Transaction ID : A8D07657317ED4570ADC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 11 / 2021**
Transaction ID : ABA6F81FBC3934FEB823
 Amount of Each Receipt this Period 50.00
 Memo Item

C. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A559B8741FF5149E0BFC
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1746 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 04 / 29 / 2021
Transaction ID : A4A715B69BF72453591F
 Amount of Each Receipt this Period 500.00
 Memo Item

B. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A176725D06FFF4A61A5B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A650891BA9A79465D80D
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1747 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : A70C4A057C3814631B09
 Amount of Each Receipt this Period 100.00
 Memo Item

B. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **06 / 10 / 2021**
Transaction ID : A0CB8F27B5ECD4F02A64
 Amount of Each Receipt this Period 50.00
 Memo Item

C. REISS, CLAIRE, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9675 LA JOLLA FARMS ROAD
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL REAT ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt **06 / 28 / 2021**
Transaction ID : AB6824EA5D67A4733A27
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1748 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REK, ZBIGNIEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1501 N HALIFAX AVE
 City DAYTONA BEACH State FL Zip Code 32118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : AF339A1517CBC4F03885
 Amount of Each Receipt this Period 100.00
 Memo Item

B. REMPEL, TAMERA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17909 E PLUMLEY RD
 City PALMER State AK Zip Code 99645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 06 / 2021**
Transaction ID : A4FEC5411AA834BAB9E3
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RENFROE, BRIDGET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 ASHWOOD CIRCLE
 City PANAMA CITY State FL Zip Code 32405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLIDELL MEMORIAL HOSPITAL Occupation (for Individual) NEONATAL NURSE PRACTITIONER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 08 / 2021**
Transaction ID : A645237BB35034BE68FE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1749 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RENFROE, BRIDGET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 ASHWOOD CIRCLE
 City PANAMA CITY State FL Zip Code 32405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLIDELL MEMORIAL HOSPITAL Occupation (for Individual) NEONATAL NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 08 / 2021**
Transaction ID : A45EFAF73BCC34E8BA31
 Amount of Each Receipt this Period 50.00
 Memo Item

B. REYNOLDS, G STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 MOUNTAIN SLOPE LANE
 City FORT VALLEY State VA Zip Code 22652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 16 / 2021**
Transaction ID : A8B104A381F1A476CB05
 Amount of Each Receipt this Period 35.00
 Memo Item

C. REYNOLDS, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3102 S 22ND ST
 City SAINT JOSEPH State MO Zip Code 64503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRACE EVANGELICAL CHURCH Occupation (for Individual) LABOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 18 / 2021**
Transaction ID : A605FF70F303E422F990
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1750 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REYNOLDS, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1512

City ORANGE PARK	State FL	Zip Code 32067
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021

Transaction ID : ADD4EA2E993684BBAA7

Amount of Each Receipt this Period
50.00

Memo Item

B. REYNOLDS, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1512

City ORANGE PARK	State FL	Zip Code 32067
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021

Transaction ID : A313B0195572C4AA3A7B

Amount of Each Receipt this Period
50.00

Memo Item

C. REYNOLDS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 RIO CIDADE WAY

City SACRAMENTO	State CA	Zip Code 95831
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021

Transaction ID : ADA962084A2074592875

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1751 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE

City ADA	State OK	Zip Code 74820
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021

Transaction ID : A3E120A3C93414BBF84A

Amount of Each Receipt this Period
 35.00

Memo Item

B. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE

City ADA	State OK	Zip Code 74820
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021

Transaction ID : A2FB5A17F848B4447BCA

Amount of Each Receipt this Period
 10.00

Memo Item

C. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE

City ADA	State OK	Zip Code 74820
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021

Transaction ID : AC560EAD503904888962

Amount of Each Receipt this Period
 5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1752 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **03 / 27 / 2021**
Transaction ID : AAEF5C0B08517481BCA
 Amount of Each Receipt this Period 5.00
 Memo Item

B. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A27592E89CDC245586F
 Amount of Each Receipt this Period 5.00
 Memo Item

C. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **04 / 08 / 2021**
Transaction ID : A640AD603DFB24D24BB4
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1753 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A2ADFA23B397D4146B81
 Amount of Each Receipt this Period 5.00
 Memo Item

B. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 04 / 10 / 2021
Transaction ID : A103E59C27C954C15804
 Amount of Each Receipt this Period 5.00
 Memo Item

C. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 04 / 13 / 2021
Transaction ID : AE6A1CAAA18AE4BE49B2
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1754 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RHODES, J L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 396 SOUTH MORRISON DRIVE

City ADA	State OK	Zip Code 74820
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2021

Transaction ID : AE22C30AC43DC4A9699E

Amount of Each Receipt this Period
10.00

Memo Item

B. RHODES, J L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 396 SOUTH MORRISON DRIVE

City ADA	State OK	Zip Code 74820
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2021

Transaction ID : AEB5BCE24C98B4D078F5

Amount of Each Receipt this Period
35.00

Memo Item

C. RHODES, J L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 396 SOUTH MORRISON DRIVE

City ADA	State OK	Zip Code 74820
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2021

Transaction ID : ABF00B58498AB413AB1B

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1755 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A31BFE6C9F23A45EDBCC
 Amount of Each Receipt this Period 20.00
 Memo Item

B. RHODES, J L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 396 SOUTH MORRISON DRIVE
 City ADA State OK Zip Code 74820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 06 / 28 / 2021
Transaction ID : ACC638FE25483401A8E9
 Amount of Each Receipt this Period 20.00
 Memo Item

C. RIBNER, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 SOUTH BOSTON, STE. 1130
 City TULSA State OK Zip Code 74103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A918FA275700B440FBE2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1756 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIBNER, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 SOUTH BOSTON, STE. 1130
 City TULSA State OK Zip Code 74103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AE6CA1A2457C449FABFF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RICE, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4625 MOUNTAINGATE DR.
 City RENO State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 18 / 2021
Transaction ID : A77FE9E64ECAC441D92A
 Amount of Each Receipt this Period 250.00
 Memo Item

C. RICHARDS, DAVID, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8790 US HIGHWAY 10
 City BUTTE State MT Zip Code 59701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 30 / 2021
Transaction ID : AFBFDD09BE7EA485095F
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1757 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RICHARDSON, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 FOX DEN COURT
 City HENDERSONVILLE State NC Zip Code 28792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A0F7A3508A7F84555870
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. RICHARDSON, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 FOX DEN COURT
 City HENDERSONVILLE State NC Zip Code 28792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : AFCF2A98FD2C448158FA
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. RICHARDSON, JAMES, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 OAKHURST DR
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2021
Transaction ID : AF16EE28C84314A99947
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1758 OF 3012
(check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RICHARDSON, JAMES, W, ,
Mailing Address 1000 OAKHURST DR
City WEST LAFAYETTE State IN Zip Code 47906
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 425.00

Date of Receipt 03 / 13 / 2021
Transaction ID : A6BE12CD267864B4C84D
Amount of Each Receipt this Period 25.00
Memo Item

B. RICHARDSON, JAMES, W, ,
Mailing Address 1000 OAKHURST DR
City WEST LAFAYETTE State IN Zip Code 47906
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 425.00

Date of Receipt 03 / 13 / 2021
Transaction ID : A34ABB644C2A04D2D9C6
Amount of Each Receipt this Period 100.00
Memo Item

C. RICHARDSON, JAMES, W, ,
Mailing Address 1000 OAKHURST DR
City WEST LAFAYETTE State IN Zip Code 47906
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 475.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A392F314EDAD24DDE95D
Amount of Each Receipt this Period 50.00
Memo Item

SUBTOTAL of Receipts This Page (optional) 175.00
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1759 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RICHARDSON, JAMES, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 OAKHURST DR
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 03 / 27 / 2021
Transaction ID : AA29C1DB763F64D38867
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RICHARDSON, NOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 WABASH AVE
 City SAN DIEGO State CA Zip Code 92104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 27 / 2021
Transaction ID : A281962EA636841ABB09
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RICHARDSON, NOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 WABASH AVE
 City SAN DIEGO State CA Zip Code 92104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A004C2E673B214B44B2B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

300.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1760 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RICHARDSON, NOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 WABASH AVE
 City SAN DIEGO State CA Zip Code 92104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A0582A1BDB9D14E38ABA
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. RICHARDSON, NOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4015 WABASH AVE
 City SAN DIEGO State CA Zip Code 92104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A5E879445204B48E4B37
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. RICHTER, GRANT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 726 E WOOD
 City COLUMBIA State IL Zip Code 62236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A18AA0E64B4784E65B9F
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1761 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RICHTER, GRANT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 726 E WOOD

City COLUMBIA	State IL	Zip Code 62236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2021

Transaction ID : AC1F40F23A9ED4EA6A72

Amount of Each Receipt this Period
10.00

Memo Item

B. RICHTER, GRANT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 726 E WOOD

City COLUMBIA	State IL	Zip Code 62236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : A0905A06967E64249841

Amount of Each Receipt this Period
50.00

Memo Item

C. RICH, WILLIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4519 SILVERBERRY CT

City JACKSONVILLE	State FL	Zip Code 32224
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2021

Transaction ID : AF52F565FE1A04BCDA0D

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1762 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RICH, WILLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4519 SILVERBERRY CT
 City JACKSONVILLE State FL Zip Code 32224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 08 / 2021**
Transaction ID : A7F10AA4805DE44F1A76
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RICH, WILLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4519 SILVERBERRY CT
 City JACKSONVILLE State FL Zip Code 32224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **06 / 08 / 2021**
Transaction ID : AE0840902B2914268B68
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RICKS, JUNE, MARIE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2003 LEWIS AVE
 City PASCAGOULA State MS Zip Code 39567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : AE49A9C2A25CC49018B3
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1763 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIDDLE, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18881 JOLSON AVENUE #7
 City BOCA RATON State FL Zip Code 33496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : A7D42000C1DC44CE8A4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RIDLEY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5115 FRANKLYN BLVD B
 City WILLOUGHBY State OH Zip Code 44094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : A80770F3CA28E476599B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RIDLEY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5115 FRANKLYN BLVD B
 City WILLOUGHBY State OH Zip Code 44094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A1791EB587D854D65B52
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1764 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIEBE, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N1546 COUNTY LINE RD

City CLINTON	State WI	Zip Code 53525
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A45FD906CC5134CE09B5

Amount of Each Receipt this Period
50.00

Memo Item

B. RIEBE, WAYNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N1546 COUNTY LINE RD

City CLINTON	State WI	Zip Code 53525
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : ACFD9DA762C32417AB4B

Amount of Each Receipt this Period
50.00

Memo Item

C. RIEDER, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6122 WOODHALL DRUVR

City CINCINNATI	State OH	Zip Code 45247
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE SALES
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2021

Transaction ID : A08BF034049FA4252B8E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1765 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIEDER, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6122 WOODHALL DRUVR
 City CINCINNATI State OH Zip Code 45247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A405838B01AAA418784A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RIGHETTI, VINCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 CHECOTAH CIR
 City STOCKTON State CA Zip Code 95210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A2759E8FF625B4325858
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RIGNEY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2572 FAIRBROOK DR
 City MOUNTAIN VIEW State CA Zip Code 94040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : ACD1AAC1C4A1942C2B58
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1766 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIGNEY, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2572 FAIRBROOK DR
 City MOUNTAIN VIEW State CA Zip Code 94040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AFBEE65F9BF394B4CA40
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RING, MILTON, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 251 CHAPMAN RD
 City SUMNER State GA Zip Code 31789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AD21FE3E763B8447198E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RING, MILTON, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 251 CHAPMAN RD
 City SUMNER State GA Zip Code 31789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A2780E083336466CB42
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1767 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RINI, JACLYN, , ,

Mailing Address 19351 SAILWIND LANE

City HUNTINGTON BEACH	State CA	Zip Code 92646
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACE DEVELOPMENT CABINETRY INC.	Occupation (for Individual) CONTRACTOR - SMALL BUSINESS IN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021

Transaction ID : A2DD41053A91B45E9B8A

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RINI, JACLYN, , ,

Mailing Address 19351 SAILWIND LANE

City HUNTINGTON BEACH	State CA	Zip Code 92646
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACE DEVELOPMENT CABINETRY INC.	Occupation (for Individual) CONTRACTOR - SMALL BUSINESS II
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021

Transaction ID : A2750D59B6F294997AAF

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
RIVERA, ARTHUR, , ,

Mailing Address 906 SLATERS LANE

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021

Transaction ID : AAAECA2377F414F42BA7

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1768 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIVERA, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 SLATERS LANE
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A1FDB06211EDC47E1AF1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RIZOULOS, FOSTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1128 12TH ST
 City ARGYLE State TX Zip Code 76226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AGUIRRE PROJECT RESOURCES Occupation (for Individual) SENIOR CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A32A7F98C1404434F805
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RIZZO, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 CENTRE STREET
 City QUINCY State MA Zip Code 02169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALON FABIO Occupation (for Individual) HAIRSTYLIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AD142EA8D080D41C595D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1769 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBB, GEORGIA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 SHOREPINES CIR
 City COOS BAY State OR Zip Code 97420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : A58763BFB92A34FECB2F
 Amount of Each Receipt this Period 105.00
 Memo Item

B. ROBB, GEORGIA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1865 SHOREPINES CIR
 City COOS BAY State OR Zip Code 97420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **06 / 04 / 2021**
Transaction ID : A9548080244294BEF848
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ROBB, JAMES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 14 / 2021**
Transaction ID : A4A8549E2BE7B47B5A68
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1770 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2021
Transaction ID : A1F1DC3542D104A22B14
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : A1ED4CD146C5C4B3493A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A035F149280284E56B85
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1771 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A60E119857FE84B06A6F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 26 / 2021
Transaction ID : A758A3C803A03477C8F6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 05 / 14 / 2021
Transaction ID : ABC0F7F9BAE6E417EBA6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1772 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AA13229415B8049CE9D7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AFF65DCF3B74C4FAAB14
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROBB, JAMES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4944 BINGHAM ST
 City PHILADELPHIA State PA Zip Code 19120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A5230F61A05E74D8C9AF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1773 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBERTS, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1404 KENSINGTON WOODS DRIVE
 City LUTZ State FL Zip Code 33549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHOENIX METALS Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 26 / 2021
Transaction ID : ACC95BA7205CD4B258EB
 Amount of Each Receipt this Period 250.00
 Memo Item

B. ROBERTS, JAMES, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 7386
 City SAVANNAH State GA Zip Code 31418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTS TRUCK CENTER Occupation (for Individual) PRESIDENT TRUCK DEALERSHIP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : AF8565E693B394B0485A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROBERTS, JAMES, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 7386
 City SAVANNAH State GA Zip Code 31418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTS TRUCK CENTER Occupation (for Individual) PRESIDENT TRUCK DEALERSHIP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : AE5BD91A9EF78400794B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1774 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBERTS, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4411 PACES BATTLE NW
 City ATLANTA State GA Zip Code 30327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A9233938ABF424109B05
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROBERTS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6259 NW 118TH STREET RD
 City REDDICK State FL Zip Code 32686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 15 / 2021
Transaction ID : AF02DCDDB8DDB44CE94E
 Amount of Each Receipt this Period 250.00
 Memo Item

C. ROBERTS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6259 NW 118TH STREET RD
 City REDDICK State FL Zip Code 32686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 15 / 2021
Transaction ID : A0BA1C92AA06D4405A9B
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1775 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBERTS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6259 NW 118TH STREET RD
 City REDDICK State FL Zip Code 32686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2021
Transaction ID : A12935DEFF8124627ACB
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. ROBERTS, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6259 NW 118TH STREET RD
 City REDDICK State FL Zip Code 32686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2021
Transaction ID : AC5845A19EA7449DDBEB
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. ROBERTSON, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 PASEO PALO VERDE
 City CASA GRANDE State AZ Zip Code 85194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A31A305CA10214D6AB42
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1776 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBERTSON, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9150 PASEO PALO VERDE
 City CASA GRANDE State AZ Zip Code 85194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SELF EMPLOYED FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AD7EEAE47CD5244AFB1E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROBERTSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11365 LA VEREDA DRIVE
 City SANTA ANA State CA Zip Code 92705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDLERS CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 10 / 2021
Transaction ID : ADD7E66529AF44A8EA6D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROBERTSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11365 LA VEREDA DRIVE
 City SANTA ANA State CA Zip Code 92705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDLERS CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 10 / 2021
Transaction ID : ADD1569D1CA4A4F38AB6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1777 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBERTSON, MONICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2410 RAVENWOOD DRIVE
 City MURFREESBORO State TN Zip Code 37129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WAYSTATION, INC. Occupation (for Individual) COUNSELOR/CHAPLAIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A6FD33DD4C37E40E997C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROBERTSON, ROGER, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8113 SUMMIT
 City KANSAS CITY State MO Zip Code 64114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMMERCE BANK Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A38940A32975E490FA6E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROBERTS, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7935 JUNE LAKE DR.
 City SAN DIEGO State CA Zip Code 92119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A1276BDF3F87C4DACA30
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1778 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROBERTS, SHERRY, , ,

Mailing Address 7935 JUNE LAKE DR.

City SAN DIEGO	State CA	Zip Code 92119
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021

Transaction ID : A3BC6E22C9C4B4EA6BE

Amount of Each Receipt this Period
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROBERTS, SHERRY, , ,

Mailing Address 7935 JUNE LAKE DR.

City SAN DIEGO	State CA	Zip Code 92119
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021

Transaction ID : AA948943074494125A27

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROBERTS, SHERRY, , ,

Mailing Address 7935 JUNE LAKE DR.

City SAN DIEGO	State CA	Zip Code 92119
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021

Transaction ID : AE61734ED9D494B5BBBF

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1779 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBERTS, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7935 JUNE LAKE DR.
 City SAN DIEGO State CA Zip Code 92119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AFD992A4A03B14A02B37
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROBERTS, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7935 JUNE LAKE DR.
 City SAN DIEGO State CA Zip Code 92119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 27 / 2021
Transaction ID : AB3145FB2306247D18C1
 Amount of Each Receipt this Period 25.00
 Memo Item

C. ROBINSON, ANTONIETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 CANTILENA
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A382B379ED70A4552AE6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1780 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBINSON, ANTONIETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 CANTILENA
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A4BB12F65630C4F5EB44
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROBINSON, ANTONIETTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 CANTILENA
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A34E32866691544E5B53
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ROBINSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2133 BETHESDA CHURCH ROAD
 City CARROLLTON State GA Zip Code 30117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AB58A513420E04E9EBDE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1781 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBINSON, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE WIDE INSPECTIONS INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : AA62492FC800A410883C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROBINSON, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE WIDE INSPECTIONS INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A9BD4B1690FFA49DDAD7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROBINSON, DARRELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 LEASON COVE DRIVE
 City LUSBY State MD Zip Code 20657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE WIDE INSPECTIONS INC Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : A68D642FA682E48178E7
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1782 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBINSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5438 EAST CHOLLA STREET
 City SCOTTSDALE State AZ Zip Code 85254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STILLWATER LANDSCAPE MANAGEMENT, LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 15 / 2021**
Transaction ID : AD4A6FC022E174D39B29
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROBINSON, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2578 SW HUNTER RD
 City TOWANDA State KS Zip Code 67144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 16 / 2021**
Transaction ID : AF81FAA0370164E628D9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ROBINSON, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2578 SW HUNTER RD
 City TOWANDA State KS Zip Code 67144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 19 / 2021**
Transaction ID : AFF6D962373F247278EB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1783 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBISON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 FORDYCE MANOR

City SAINT CHARLES	State MO	Zip Code 63303
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIKSIC PLUMBING	Occupation (for Individual) PLUMBER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : A2CF74B19917D427AB75

Amount of Each Receipt this Period
35.00

Memo Item

B. ROBISON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 FORDYCE MANOR

City SAINT CHARLES	State MO	Zip Code 63303
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIKSIC PLUMBING	Occupation (for Individual) PLUMBER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : A91033D014EFC41B9B05

Amount of Each Receipt this Period
35.00

Memo Item

C. ROBISON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 FORDYCE MANOR

City SAINT CHARLES	State MO	Zip Code 63303
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIKSIC PLUMBING	Occupation (for Individual) PLUMBER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : AE825F90030E44501B93

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1784 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROCHARDSON, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 W SAM HOUSTON PRKWY N
100

City HOUSTON State TX Zip Code 77043

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLAZER BUILDING Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 01 / 29 / 2021
Transaction ID : AA4BC671D91FC4398962

Amount of Each Receipt this Period
 250.00

Memo Item

B. ROCHELEAU, JANICE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1815 N JOANN ST

City WICHITA State KS Zip Code 67203

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 25 / 2021
Transaction ID : AB050C9492F604405B71

Amount of Each Receipt this Period
 25.00

Memo Item

C. RODA, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 725 STEEPLECHASE ROAD

City LANDISVILLE State PA Zip Code 17538

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 28 / 2021
Transaction ID : A9C662B36A13A4694A47

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1785 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RODA, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 STEEPLECHASE ROAD
 City LANDISVILLE State PA Zip Code 17538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A22B56F2C3C984E0289F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RODRIGUEZ, ANTULIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2340 NEWMAN STREET
 City ATLANTA State GA Zip Code 30344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LAND LORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A95406965A7B2468FB37
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RODRIGUEZ, CARLOSEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1581 BRICKELL AVE. #1201
 City MIAMI State FL Zip Code 33129-1237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 28 / 2021
Transaction ID : A6BED5ABB8020402AA2D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1786 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RODRIGUEZ, CARLOSEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1581 BRICKELL AVE. #1201
 City MIAMI State FL Zip Code 33129-1237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2021
Transaction ID : AA6AD7D4865634D1B873
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RODRIGUEZ, CARLOSEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1581 BRICKELL AVE. #1201
 City MIAMI State FL Zip Code 33129-1237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A0B95B5E31D4342E0A53
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 12 / 2021
Transaction ID : ACC67304013324FA6808
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1787 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A1DF8A50F47C94020A97
 Amount of Each Receipt this Period 25.00
 Memo Item

B. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A0D17D7AD378D4AAF9B3
 Amount of Each Receipt this Period 35.00
 Memo Item

C. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 12 / 2021
Transaction ID : A50A2D59CD2EF4476A96
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1788 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A36BBE6FE76D84E4E904
 Amount of Each Receipt this Period 25.00
 Memo Item

B. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A6CA83C6363E6408E9BD
 Amount of Each Receipt this Period 25.00
 Memo Item

C. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A5724DCACADA04911A4D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1789 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A80FC9C7D555A41FC95F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. RODRIGUEZ, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 SHEPPARD ROAD W
 City LADYS ISLAND State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A8C2E2179309F40F5980
 Amount of Each Receipt this Period 25.00
 Memo Item

C. RODRIGUEZ, LOLITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 SW PALM COVE DR.
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 28 / 2021
Transaction ID : ACBAD096D5FB64D148B4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1790 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RODRIGUEZ, LOLITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 SW PALM COVE DR.
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 28 / 2021
Transaction ID : ADD000E47AA4141CFA34
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROE, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 US 50 4400 WILLOW HILLS LANE
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DER DEVELOPMENTS CO. Occupation (for Individual) DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A4CD83D5C39E54371B03
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ROE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8471 SE BRISTOL WAY
 City JUPITER State FL Zip Code 33458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A NURSES REGISTRY Occupation (for Individual) NURSE ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : ACBCF283AF249483497F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1791 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROE, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8471 SE BRISTOL WAY
 City JUPITER State FL Zip Code 33458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A NURSES REGISTRY Occupation (for Individual) NURSE ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 15 / 2021**
Transaction ID : A12F59C405F714ED69F3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROEPKE, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 BRAGG CIRCLE
 City TULLAHOMA State TN Zip Code 37388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 07 / 2021**
Transaction ID : A39EAE52B184B4DBB988
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ROEPKE, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 BRAGG CIRCLE
 City TULLAHOMA State TN Zip Code 37388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 07 / 2021**
Transaction ID : A3B9C5074153D46878C5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 1792 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROE, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 937 THREEWOOD CIRCLE
 City BOWLING GREEN State KY Zip Code 42103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A1CEA319C9B654504884
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ROGERS, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 CAMBRIDGE RD.
 City CAMDEN WYOMING State DE Zip Code 19934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAYHEALTH Occupation (for Individual) RN, DIRECTOR ACCREDITATION SE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : AD7E47B7F81F049C6B86
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. ROGERS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2272 LAFAYETTE LNDG
 City ROCKWALL State TX Zip Code 75032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F AND J VENTURES Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A32670B70CF924FD2AA6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1793 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROGERS, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2272 LAFAYETTE LNDG
 City ROCKWALL State TX Zip Code 75032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F AND J VENTURES Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A28C22F97C5D8412A848
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROMANELLI, FRANK, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 EAST 57TH STREET 19N
 City NEW YORK State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A1622E2E6053A4F69873
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ROMANELLI, FRANK, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 EAST 57TH STREET 19N
 City NEW YORK State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A98ACB451FD7F48A08EA
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1794 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROMANELLI, FRANK, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 EAST 57TH STREET
 19N
 City NEW YORK State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AF5ADB35946B24969A34
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROMIG, DELAUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13789 HOLYOKE LN
 City SAINT PAUL State MN Zip Code 55124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A9210CA83840545379C4
 Amount of Each Receipt this Period 10.00
 Memo Item

C. ROOB, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 WOODBINE LANE
 City NORTHBROOK State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A7E20B4E77BE34415A07
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 145.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1795 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROOB, ED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 841 WOODBINE LANE

City NORTHBROOK	State IL	Zip Code 60062
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2021

Transaction ID : A2FC54860D37549CE94E

Amount of Each Receipt this Period
100.00

Memo Item

B. ROOB, ED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 841 WOODBINE LANE

City NORTHBROOK	State IL	Zip Code 60062
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		26		2021

Transaction ID : A4D020D4CE5774620BA7

Amount of Each Receipt this Period
100.00

Memo Item

C. ROOKER, LORI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1217 STEEKEE ROAD

City LOUDON	State TN	Zip Code 37774
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		01		2021

Transaction ID : A79FD2CAA7A194C69815

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1796 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROONEY, ASHLEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 538 DUANE ST
 City GLEN ELLYN State IL Zip Code 60137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FUSCHIA Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : ABCFAA77BA5E34FBAA11
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ROONEY, ASHLEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 538 DUANE ST
 City GLEN ELLYN State IL Zip Code 60137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FUSCHIA Occupation (for Individual) RETAIL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A723D6CF76D5C46D394A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ROOSE, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11019 CANBY AVE
 City PORTER RANCH State CA Zip Code 91326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWYERS TITLE Occupation (for Individual) VP SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 05 / 21 / 2021
Transaction ID : AD74A47EA968840F5A90
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	205.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1797 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROOSE, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11019 CANBY AVE
 City PORTER RANCH State CA Zip Code 91326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAWYERS TITLE Occupation (for Individual) VP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ACA68299DBA5E45A99A3
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROSAASEN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30763 E SUNSET DR S
 City REDLANDS State CA Zip Code 92373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSAASEN CORP Occupation (for Individual) INTERIOR DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 22 / 2021
Transaction ID : A909A8B5B4C2E4635860
 Amount of Each Receipt this Period 250.00
 Memo Item

C. ROSAASEN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30763 E SUNSET DR S
 City REDLANDS State CA Zip Code 92373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSAASEN CORP Occupation (for Individual) INTERIOR DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 26 / 2021
Transaction ID : A29AB974C62B547E1BD2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1798 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROSAASEN, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30763 EAST SUNSET DR SOUTH
 City REDLANDS State CA Zip Code 92373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSAASEN CORP Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : AD94D2B4780734887A5B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ROSCITT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ISLAND DRIVE
 City BRICK State NJ Zip Code 08724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 28 / 2021**
Transaction ID : A7BA2C5EE802049A288B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROSCITT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ISLAND DRIVE
 City BRICK State NJ Zip Code 08724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A09A06A7B1F4447C4ADB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1799 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROSCITT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ISLAND DRIVE
 City BRICK State NJ Zip Code 08724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : A4850184BA5574533A7D
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROSE, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38450 DESERT GREENS DRIVE EAST
 City PALM DESERT State CA Zip Code 92260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 03 / 2021**
Transaction ID : A90AAFBB3C6804CBD8E6
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROSE, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38450 DESERT GREENS DRIVE EAST
 City PALM DESERT State CA Zip Code 92260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : AE722E80905614DADAEB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1800 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROSE, DONNIE, L., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74776 VIRTUE RD
 City KIMBOLTON State OH Zip Code 43749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A0230BB3BDCBE43778D8
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROSE, EDWARD, L., JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 NAPLES CT 209
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROSE AND ROSE LTD Occupation (for Individual) CO OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A31CB1A2D9AD44F35A0F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ROSENBLATT, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 RIDGE ROAD
 City COLD SPRING HARBOR State NY Zip Code 11724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHAMPION PARKING Occupation (for Individual) PARKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A109655B3892E43E29B8
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1801 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROSLING, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 70367

City SEATTLE	State WA	Zip Code 98127
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2021

Transaction ID : ABF6CE572B0814E81A21

Amount of Each Receipt this Period
300.00

Memo Item

B. ROSS, ADRIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6851 ALVARADO ROAD #21

City SAN DIEGO	State CA	Zip Code 92120
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) HOLISTIC HEALTH PRACTITIONER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021

Transaction ID : A60C1972FCB744DAFA0E

Amount of Each Receipt this Period
50.00

Memo Item

C. ROSS, ADRIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6851 ALVARADO ROAD #21

City SAN DIEGO	State CA	Zip Code 92120
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) HOLISTIC HEALTH PRACTITIONER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021

Transaction ID : A6057E9970528469BB29

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1802 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROSSBERG, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1086 WEST SOUTH JORDAN PARKWAY
 101
 City SOUTH JORDAN State UT Zip Code 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PORTIS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2021
Transaction ID : A0EA59073035A4A8A9DF
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. ROSSBERG, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1086 WEST SOUTH JORDAN PARKWAY
 101
 City SOUTH JORDAN State UT Zip Code 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PORTIS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2021
Transaction ID : A72013CE6EEE449249DA
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. ROSSBERG, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1086 WEST SOUTH JORDAN PARKWAY
 101
 City SOUTH JORDAN State UT Zip Code 84095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PORTIS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : AB0AEAABD86114442963
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1803 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ROSSBERG, KEITH, , ,

Mailing Address 1086 WEST SOUTH JORDAN PARKWAY
101

City SOUTH JORDAN State UT Zip Code 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PORTIS Occupation (for Individual) SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
04 / 17 / 2021
Transaction ID : AA5EC4A687953418DBD8

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROSSBERG, KEITH, , ,

Mailing Address 1086 WEST SOUTH JORDAN PARKWAY
101

City SOUTH JORDAN State UT Zip Code 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PORTIS Occupation (for Individual) SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
05 / 17 / 2021
Transaction ID : A2C4899AFE5DE453080F

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ROSSBERG, KEITH, , ,

Mailing Address 1086 WEST SOUTH JORDAN PARKWAY
101

City SOUTH JORDAN State UT Zip Code 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PORTIS Occupation (for Individual) SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
06 / 17 / 2021
Transaction ID : AA71534082DEA43A4AC2

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1804 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROSSITER, ELDONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 E 50 N
 City LINDON State UT Zip Code 84042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A0EB4D9DA16994B9BB3D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ROSSITER, ELDONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 E 50 N
 City LINDON State UT Zip Code 84042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A199283A76BA2435B9C2
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ROTAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 LONGWOODS LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2021
Transaction ID : A86DC1148DC56487BA9A
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1805 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROTAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 LONGWOODS LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2021
Transaction ID : AA77DEF21B7E24E24BB7
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. ROTAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 LONGWOODS LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2021
Transaction ID : A468A9A4B4C1D4016A95
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. ROTAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 LONGWOODS LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2021
Transaction ID : A275AC17E97BC4A39888
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1806 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROTAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 LONGWOODS LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021
Transaction ID : ACE44C80D8D2B41A388E
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. ROTAN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 413 LONGWOODS LN
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : A7D01B176B81241D9916
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. ROTHE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9480 GATEWAY DRIVE
 101
 City RENO State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 04 / 2021
Transaction ID : A8693BC543C124DF583D
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1807 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROTHE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9480 GATEWAY DRIVE
 101
 City RENO State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2021
Transaction ID : A2BC6937015EE4387BF4
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. ROTHE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9480 GATEWAY DRIVE
 101
 City RENO State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : AE4ED1B5D4D3F4A449B7
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. ROTHE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9480 GATEWAY DRIVE
 101
 City RENO State NV Zip Code 89521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2021
Transaction ID : AB3BCF062E7084D4A905
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1808 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROTT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1060 N CENTRAL AVE

City RICHLAND CENTER	State WI	Zip Code 53581
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DON COUEY TRUCKING	Occupation (for Individual) TRUCK DRIVER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2021

Transaction ID : AC219F66663FF4B60803

Amount of Each Receipt this Period
500.00

Memo Item

B. ROUSSEAU, WILFRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34682 SW 188 ST
LOT 329

City HOMESTEAD	State FL	Zip Code 33034
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2021

Transaction ID : AD23155A5BC2143CB77

Amount of Each Receipt this Period
50.00

Memo Item

C. ROUSSEAU, WILFRED, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34682 SW 188 ST
LOT 329

City HOMESTEAD	State FL	Zip Code 33034
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2021

Transaction ID : A194BC61D1BED4422995

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1809 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROWAN, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10394 MARBLE EGRET DRIVE
 City JACKSONVILLE State FL Zip Code 32257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AFA1CD940B6584202AF0
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROWE, RONALD, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9335 FORD RD
 City YPSILANTI State MI Zip Code 48198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOMOCO Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : AB7AA6EA4F47D41B898B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROWE, RONALD, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9335 FORD RD
 City YPSILANTI State MI Zip Code 48198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOMOCO Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2021
Transaction ID : AAA4692D6708D4843877
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1810 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROWE, RONALD, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9335 FORD RD

City YPSILANTI	State MI	Zip Code 48198
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOMOCO	Occupation (for Individual) ELECTRICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : A7501C4CA84D84775B59

Amount of Each Receipt this Period
100.00

Memo Item

B. ROWE, RONALD, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9335 FORD RD

City YPSILANTI	State MI	Zip Code 48198
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FOMOCO	Occupation (for Individual) ELECTRICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2021

Transaction ID : AE380EF77226C433980F

Amount of Each Receipt this Period
100.00

Memo Item

C. ROYAL, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2923 SOUTH GRANBY STREET

City AURORA	State CO	Zip Code 80014
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PREMIER SPINE AND JOINT	Occupation (for Individual) NURSE PRACTITIONER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2021

Transaction ID : ACA4DEC25D8CD4711B7F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 1811 OF 3012
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROYAL, KAREN, , ,
Mailing Address 2923 SOUTH GRANBY STREET
City AURORA State CO Zip Code 80014
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) PREMIER SPINE AND JOINT Occupation (for Individual) NURSE PRACTITIONER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 300.00

Date of Receipt 06 / 17 / 2021
Transaction ID : AF2BA9C97563E474999E
Amount of Each Receipt this Period 50.00
Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROY, JOSEPHINE, , ,
Mailing Address 1OCEAN AVE 81
City BELMAR State NJ Zip Code 07719
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) WEST NEW YORK BOARD OF EDUCATION Occupation (for Individual) TEACHER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 250.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A2009C53EF2784FE3B7A
Amount of Each Receipt this Period 50.00
Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROY, JOSEPHINE, , ,
Mailing Address 1OCEAN AVE 81
City BELMAR State NJ Zip Code 07719
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) WEST NEW YORK BOARD OF EDUCATION Occupation (for Individual) TEACHER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 300.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AB9042304A2264110BA5
Amount of Each Receipt this Period 50.00
Memo Item

SUBTOTAL of Receipts This Page (optional)..... 150.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1812 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROY, JOSEPHINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1OCEAN AVE
81

City BELMAR State NJ Zip Code 07719

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WEST NEW YORK BOARD OF EDUCATION Occupation (for Individual) TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AE7B869AD8B584C8AB03

Amount of Each Receipt this Period 50.00

Memo Item

B. RUBEL, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18543 YORBA LINDA BLVD

City YORBA LINDA State CA Zip Code 92886

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) TILE & STONE INSTALL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A3F9F2826899746A8913

Amount of Each Receipt this Period 50.00

Memo Item

C. RUBEL, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18543 YORBA LINDA BLVD

City YORBA LINDA State CA Zip Code 92886

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF Occupation (for Individual) TILE & STONE INSTALL

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AB481A75BF2F64CDFBE9

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1813 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUBINO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DOUGLAS DRIVE
 City MANSFIELD State MA Zip Code 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : AE98282401DB9400C9D1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. RUBINO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DOUGLAS DRIVE
 City MANSFIELD State MA Zip Code 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : AAD52DFFE15704FB4BC7
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. RUBINO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DOUGLAS DRIVE
 City MANSFIELD State MA Zip Code 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A3E83EAEAA4CF4C3EA13
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1814 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUBINO, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DOUGLAS DRIVE
 City MANSFIELD State MA Zip Code 02048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A6BE81FFE68A04443826
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. RUCH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28243 WEST WORCESTER ROAD
 City SUN CITY State CA Zip Code 92586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A88934BDE1FBD41B3B98
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. RUCH, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28243 WEST WORCESTER ROAD
 City SUN CITY State CA Zip Code 92586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : ABA8C037705E545E0A80
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1815 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUDNIC, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 N AUSTIN AVE. #4209

City GEORGETOWN	State TX	Zip Code 78626
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOSPERSOL TECHNOLOGIES	Occupation (for Individual) SCIENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2021

Transaction ID : A77B80E72E8C34E12AB2

Amount of Each Receipt this Period
50.00

Memo Item

B. RUDNIC, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 N AUSTIN AVE. #4209

City GEORGETOWN	State TX	Zip Code 78626
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOSPERSOL TECHNOLOGIES	Occupation (for Individual) SCIENTIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2021

Transaction ID : AE18DE2F799674A0B9C9

Amount of Each Receipt this Period
50.00

Memo Item

C. RUGG, TONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10624 W BERRY PLACE

City LITTLETON	State CO	Zip Code 80127
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) LANDSCAPE ARCHITECT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2021

Transaction ID : A1A2EBA31EAE447F39AD

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1816 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUIZ, EDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5844 N SCOTTSDALE RD

City SCOTTSDALE	State AZ	Zip Code 85253
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYO	Occupation (for Individual) HEALTHCARE ADMINISTRATION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2021

Transaction ID : A30A0AD8D8E8548CDBE6

Amount of Each Receipt this Period
50.00

Memo Item

B. RUIZ, EDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5844 N SCOTTSDALE RD

City SCOTTSDALE	State AZ	Zip Code 85253
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MAYO	Occupation (for Individual) HEALTHCARE ADMINISTRATION
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2021

Transaction ID : AEE556F1A9C84423F8A7

Amount of Each Receipt this Period
50.00

Memo Item

C. RUSSELL, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5337 CAHUENGA BLVD

City CANYON COUNTRY	State CA	Zip Code 91351
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CARPENTER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2021

Transaction ID : A32412676E5264D06B0D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1817 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUSSELL, DUANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5337 CAHUENGA BLVD

City CANYON COUNTRY	State CA	Zip Code 91351
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CARPENTER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2021

Transaction ID : ACFDCF31329584E158A3

Amount of Each Receipt this Period
50.00

Memo Item

B. RUSSELL, MARSHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 572 HUNTER TRAIL NE

City CLEVELAND	State TN	Zip Code 37312
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2021

Transaction ID : AB778471CC0F14049AE7

Amount of Each Receipt this Period
35.00

Memo Item

C. RUSSELL, RALPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1425 AUTUMN RIDGE DRIVE

City COLUMBUS	State GA	Zip Code 31904-3064
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COPACO INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : A241796F915EF42089E6

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1818 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUSSELL, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1425 AUTUMN RIDGE DRIVE

City COLUMBUS	State GA	Zip Code 31904-3064
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COPACO INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : A68282264B71340B78F1

Amount of Each Receipt this Period
 50.00

Memo Item

B. RUSSELL, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 WEST VIEW

City CARLISLE	State PA	Zip Code 17013
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U.S. ARMY	Occupation (for Individual) ARMY CIVILIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 06 / 05 / 2021
Transaction ID : AA13760A4AD204018A14

Amount of Each Receipt this Period
 35.00

Memo Item

C. RUST, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 WINDMILL WAY

City SAN ANTONIO	State TX	Zip Code 78232
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 30 / 2021
Transaction ID : A54B1EA7E15454465A2F

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1819 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUX, GEORGE, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 86 GATEWAY PARK PL
 City SPRING State TX Zip Code 77380
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A12610C8AA00C4D379B4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RYALS, MELANIE, E., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 627 NORWOOD RD
 City MONROEVILLE State AL Zip Code 36460
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A027FEF371BEF4114A2A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. RYALS, MELANIE, E., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 627 NORWOOD RD
 City MONROEVILLE State AL Zip Code 36460
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A6FD6AD0E22C84FF696F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1820 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RYAN, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 317 SIDLEY ROAD

City MALVERN	State PA	Zip Code 19355-1132
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021

Transaction ID : AC4AE270EE3D247A9950

Amount of Each Receipt this Period
25.00

Memo Item

B. RYDER, KIMBERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4301 KEYES CT

City BAKERSFIELD	State CA	Zip Code 93311
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RE APPRAISER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021

Transaction ID : A4E9CE7F055714D4387E

Amount of Each Receipt this Period
50.00

Memo Item

C. RYDER, KIMBERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4301 KEYES CT

City BAKERSFIELD	State CA	Zip Code 93311
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RE APPRAISER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021

Transaction ID : A5CBE138456634F02BA1

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1821 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RYNO, DAVELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 293130
 City KERRVILLE State TX Zip Code 78029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KERRVILLE HEALTHCARE STAFFING INC Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A3BAFEB6874914CC8A86
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SABATINO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HOMESTEAD RD 62
 City LAKESIDE State AZ Zip Code 85929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2021
Transaction ID : ADECF6BAB15CA47A6A78
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SABATINO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2331 HOMESTEAD RD 62
 City LAKESIDE State AZ Zip Code 85929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AE19AE2E126D846B88DD
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1822 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SABO, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 INVERNESS LN
 City SCHERERVILLE State IN Zip Code 46375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : AB32E79A5DCB647EE9C0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SABO, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 INVERNESS LN
 City SCHERERVILLE State IN Zip Code 46375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : AE5B6A63C36DF4FA6ACA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SAGEDAL, JENNIFER, MS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1429 29TH CT
 City KENOSHA State WI Zip Code 53140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 11 / 2021**
Transaction ID : A0D4F4218F8E94A71AA4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1823 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SALAS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9605 CONEFLOWER DR NW
 City ALBUQUERQUE State NM Zip Code 87114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURYLINK Occupation (for Individual) FACILITY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AC074E8D19B6C4EF792B
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. SALAS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9605 CONEFLOWER DR NW
 City ALBUQUERQUE State NM Zip Code 87114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURYLINK Occupation (for Individual) FACILITY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2021
Transaction ID : A3BC1230629BE453D961
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. SALAS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9605 CONEFLOWER DR NW
 City ALBUQUERQUE State NM Zip Code 87114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURYLINK Occupation (for Individual) FACILITY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : AE2527F247EB14A1588D
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1824 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SALAS, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9605 CONEFLOWER DR NW

City ALBUQUERQUE	State NM	Zip Code 87114
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENTURYLINK	Occupation (for Individual) FACILITY MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2021

Transaction ID : A99E0143738C844CCB17

Amount of Each Receipt this Period
35.00

Memo Item

B. SALAS, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9605 CONEFLOWER DR NW

City ALBUQUERQUE	State NM	Zip Code 87114
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENTURYLINK	Occupation (for Individual) FACILITY MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2021

Transaction ID : AB631DDF973594E439D9

Amount of Each Receipt this Period
35.00

Memo Item

C. SALAS, DONNA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9605 CONEFLOWER DR NW

City ALBUQUERQUE	State NM	Zip Code 87114
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CENTURYLINK	Occupation (for Individual) FACILITY MANAGER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2021

Transaction ID : AF58FA63A02014C7DB97

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1825 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SALAS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9605 CONEFLOWER DR NW
 City ALBUQUERQUE State NM Zip Code 87114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURYLINK Occupation (for Individual) FACILITY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AB17B35B7AB694D05A9A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SALAZAR, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4559 ISLAND VIEW DRIVE
 City MOUND State MN Zip Code 55364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUBWAY Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A5325B02AA5C84B6FB42
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SALLEY, ROGER, G., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 SW 131ST TER
 City OKLAHOMA CITY State OK Zip Code 73170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 16 / 2021
Transaction ID : AC951E74643E54351A87
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1826 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SALLEY, ROGER, G., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1333 SW 131ST TER
 City OKLAHOMA CITY State OK Zip Code 73170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A3FE2807DFD324855874
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SALVADORI, CECILIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 TOWNE PLACE DR
 City HENDERSONVILLE State NC Zip Code 28792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW SUN, INC Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2021
Transaction ID : A1D1728AAC50847AAA7D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SALZBERG, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10671 W SANDPAPER ST
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A34C2E346054F42709ED
 Amount of Each Receipt this Period 18.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 168.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1827 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAMMITO, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10900 HWY A12
 City MONTAGUE State CA Zip Code 96064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A2AE7F9E6E31E43638CB
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SANBROTTI, ERIKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 COPPER COVE DR
 City HENDERSON State NV Zip Code 89074-6951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A2084A55315944BAEBA4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SANCHEZ, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20094 NORTHWIND SQ
 City CUPERTINO State CA Zip Code 95014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A179FDC721B2249BAB22
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1828 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANCHEZ, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20094 NORTHWIND SQ
 City CUPERTINO State CA Zip Code 95014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A0D76C2EF8E794B35972
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SANCHEZ, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4161 KRAFT AVE
 City STUDIO CITY State CA Zip Code 91604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A89635475771B4351BA5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SANCHEZ, LORRAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4161 KRAFT AVE
 City STUDIO CITY State CA Zip Code 91604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RECRUITER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A402078CCF3214FB2816
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1829 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANDERS, BRYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 KILLARNEY CT.
 City LAWRENCE State KS Zip Code 66047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **02 / 03 / 2021**
Transaction ID : A3A0D537F7A6B4E7D963
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SANDERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 W JACKSON
 City SAINT LOUIS State MO Zip Code 63119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPD CAMBRIDGE INC Occupation (for Individual) DEVELOPER SENIOR HOUSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 03 / 2021**
Transaction ID : A7338A94578F44E56899
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SANDERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 W JACKSON
 City SAINT LOUIS State MO Zip Code 63119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPD CAMBRIDGE INC Occupation (for Individual) DEVELOPER SENIOR HOUSING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 28 / 2021**
Transaction ID : A4F6BA88B9A2143F9AE8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1830 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANDERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 W JACKSON
 City SAINT LOUIS State MO Zip Code 63119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPD CAMBRIDGE INC Occupation (for Individual) DEVELOPER SENIOR HOUSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 03 / 2021
Transaction ID : AEC3186D25F4D4C01895
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SANDERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 W JACKSON
 City SAINT LOUIS State MO Zip Code 63119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPD CAMBRIDGE INC Occupation (for Individual) DEVELOPER SENIOR HOUSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A3A4102E4B81F47C3856
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SANDERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 418 W JACKSON
 City SAINT LOUIS State MO Zip Code 63119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPD CAMBRIDGE INC Occupation (for Individual) DEVELOPER SENIOR HOUSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AE129EC66FAFC46BDBCC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1831 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANDERS, DENAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12721 DUNCAN ROAD
 City HOUSTON State TX Zip Code 77066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DHS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A8AF5686CF0744E45B1D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SANDERS, DENAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12721 DUNCAN ROAD
 City HOUSTON State TX Zip Code 77066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DHS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A7163436E6B844352B3F
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SANDERS, LINDA, S, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5241 GUM CREEK
 City LOGANVILLE State GA Zip Code 30052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2021
Transaction ID : AB47A51E352B04D1A855
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1832 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANDERS, LINDA, S, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5241 GUM CREEK
 City LOGANVILLE State GA Zip Code 30052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 21 / 2021
Transaction ID : A591ADB51DA7E4EA4B6F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SANDERS, LINDA, S, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5241 GUM CREEK
 City LOGANVILLE State GA Zip Code 30052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2021
Transaction ID : A1BA31C34ED154D26B5E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SANDERS, LINDA, S, MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5241 GUM CREEK
 City LOGANVILLE State GA Zip Code 30052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AD35C52E4645F4D10A66
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1833 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANDERS, NANCY, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4103 PARKDALE STREET

City SAN ANTONIO	State TX	Zip Code 78229
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2021

Transaction ID : A0356FCF69F364A27A3E

Amount of Each Receipt this Period
100.00

Memo Item

B. SANDERS, NANCY, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4103 PARKDALE STREET

City SAN ANTONIO	State TX	Zip Code 78229
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2021

Transaction ID : AA79DA81DD02E4AAE917

Amount of Each Receipt this Period
100.00

Memo Item

C. SANDERS, NANCY, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4103 PARKDALE STREET

City SAN ANTONIO	State TX	Zip Code 78229
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2021

Transaction ID : AB427CDA1EEAB4387BF1

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1834 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANDERS, NANCY, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4103 PARKDALE STREET
 City SAN ANTONIO State TX Zip Code 78229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A6EB69B2472574D6FBE3
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SANDIFER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73130 SOMERA RD
 City PALM DESERT State CA Zip Code 92260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A4577A1599B75454DA1A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SANDIFER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73130 SOMERA RD
 City PALM DESERT State CA Zip Code 92260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AE62C744583C045118AC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1835 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANTACRUZ MARTINEZ, DARLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8485 SW 156 PL
 105
 City MIAMI State FL Zip Code 33193
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALL-USA ELEVATOR SERVICES INC Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A77D7DD66C64148A8AE2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SANTOMO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 REDMAN FARM ROAD
 City MENDHAM State NJ Zip Code 07945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 22 / 2021
Transaction ID : AF5BBC6E63D2D43EDAF8
 Amount of Each Receipt this Period 75.00
 Memo Item

C. SANTOMO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 REDMAN FARM ROAD
 City MENDHAM State NJ Zip Code 07945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A88784A5143DB4AD6A72
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1836 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANTOMO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 REDMAN FARM ROAD
 City MENDHAM State NJ Zip Code 07945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A0B520D6D31BC4F0EB15
 Amount of Each Receipt this Period 75.00
 Memo Item

B. SANTOMO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 REDMAN FARM ROAD
 City MENDHAM State NJ Zip Code 07945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AF7CB51157A3D45E797B
 Amount of Each Receipt this Period 75.00
 Memo Item

C. SANTORA, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 LINCOLN
 City HASBROUCK HEIGHTS State NJ Zip Code 07604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : AA95573EB1A3E4CC09DB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1837 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SANTORA, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 LINCOLN
 City HASBROUCK HEIGHTS State NJ Zip Code 07604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A62974807C64B4FAA9D6
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SAPERSTEIN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 LAWLER RD
 City MEDFORD State MA Zip Code 02155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A378252AA84DF467C8E7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SAPERSTEIN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 LAWLER RD
 City MEDFORD State MA Zip Code 02155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : AC33798A184EE4DFDBFB
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1838 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAPOZNIK, RACHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 NORTH OCEAN DRIVE VILLA 7
 City HOLLYWOOD State FL Zip Code 33019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAPOZNIK INSURANCE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 20 / 2021**
Transaction ID : A229C3BC579CB4020B62
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SAPPINGTON, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13010 OLD BRIDGE ROAD
 City OCEAN CITY State MD Zip Code 21842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 18 / 2021**
Transaction ID : AE915D3285FD44AC7886
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SARTOR, STACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 IMPERIAL DRIVE
 City GLENDALE State CA Zip Code 91207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 18 / 2021**
Transaction ID : AD2440155B30945B2874
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1839 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SARTOR, STACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 IMPERIAL DRIVE
 City GLENDALE State CA Zip Code 91207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2021
Transaction ID : AEF229FC8429449AF80E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SASANO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7317 CLYBOURN AVE
 City SUN VALLEY State CA Zip Code 91352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : AC24452FBCC5E405E870
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SASANO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7317 CLYBOURN AVE
 City SUN VALLEY State CA Zip Code 91352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AA77220839F4B4A68B47
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1840 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SASSER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4105 KING AIR CT.

City GRANBURY	State TX	Zip Code 76049
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2021

Transaction ID : AE8914F5361FA4A01AEC

Amount of Each Receipt this Period
50.00

Memo Item

B. SASSER, JOE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4105 KING AIR CT.

City GRANBURY	State TX	Zip Code 76049
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2021

Transaction ID : A02EB9FF981A9425A828

Amount of Each Receipt this Period
50.00

Memo Item

C. SATTLER, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 64

City AVERY	State CA	Zip Code 95224
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONTRACTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2021

Transaction ID : A3B09520F4B0D4F09926

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1841 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SATTLER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 64
 City AVERY State CA Zip Code 95224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2021
Transaction ID : A60678F2DAD414C0E8B2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SATTLER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 64
 City AVERY State CA Zip Code 95224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AA576EF562F844D48924
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SATTLER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 64
 City AVERY State CA Zip Code 95224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AA8D24C719C6440CC93F
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1842 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAUCIER, KENNETH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 GURNEY RD
 City BAKER State LA Zip Code 70714-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL COATINGS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **03 / 26 / 2021**
Transaction ID : AC8EDAD100420428A8A0
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SAUCIER, KENNETH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 GURNEY RD
 City BAKER State LA Zip Code 70714-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL COATINGS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **04 / 12 / 2021**
Transaction ID : A934A42414D3045AAB81
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SAUCIER, KENNETH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 GURNEY RD
 City BAKER State LA Zip Code 70714-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL COATINGS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : A7C68D4D824794809BD5
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1843 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAUCIER, KENNETH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 GURNEY RD
 City BAKER State LA Zip Code 70714-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL COATINGS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : A63AEFA95248545B68BC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SAUCIER, KENNETH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 GURNEY RD
 City BAKER State LA Zip Code 70714-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL COATINGS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **05 / 26 / 2021**
Transaction ID : ACA36529C85E74942B95
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SAUCIER, KENNETH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 GURNEY RD
 City BAKER State LA Zip Code 70714-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL COATINGS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt **06 / 12 / 2021**
Transaction ID : A30F3268A3D9A41A3A7D
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1844 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAUCIER, KENNETH, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10834 GURNEY RD
 City BAKER State LA Zip Code 70714-6825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL COATINGS, LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A58F3A89D8B504FD6A0C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SAUNDERS, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 NORTH STREET
 City BLUEFIELD State WV Zip Code 24701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAUNDERS STAFFING, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2021
Transaction ID : AFFE8CE7A80714E268C5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SAUNDERS, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 NORTH STREET
 City BLUEFIELD State WV Zip Code 24701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAUNDERS STAFFING, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 23 / 2021
Transaction ID : AAB5B3DD8248E45A2BE2
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1845 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAUNDERS, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 NORTH STREET
 City BLUEFIELD State WV Zip Code 24701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAUNDERS STAFFING, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2021
Transaction ID : AC41AED218DEE4AEE89C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SAUNDERS, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 NORTH STREET
 City BLUEFIELD State WV Zip Code 24701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAUNDERS STAFFING, INC. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A2915AFBB3A964285920
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SAVAGE, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2439 CARSON ST
 City REDWOOD CITY State CA Zip Code 94061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A35A2D8E502FA4A3DBC8
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1846 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAVANNAH, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14315 DOVER CT
 City LAUREL State MD Zip Code 20707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : ADE48C5A0B05A4D149F8
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SAVANNAH, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14315 DOVER CT
 City LAUREL State MD Zip Code 20707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A70682E6E40C54DB5960
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SAVU, MIHAELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2924 TURTLE CREEK RD
 City JONESBORO State AR Zip Code 72404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A8976A1AE6BBB408086B
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1847 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAVU, MIHAELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2924 TURTLE CREEK RD
 City JONESBORO State AR Zip Code 72404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A8096A89CB63D4E95B58
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SCARETTA, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1150 OCEAN AVE
 City BOHEMIA State NY Zip Code 11716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AE3DF22B1BF1445808A7
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. SCHAAP, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 263 STORY HILL ROAD
 City BOZEMAN State MT Zip Code 59715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A9BA0BFF9CDDDD438ABDI
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1848 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHAAP, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 263 STORY HILL ROAD
 City BOZEMAN State MT Zip Code 59715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : ADAA586CF061A453AA14
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCHAEFFER, ADELE, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 SOUTH 18TH STREET 2B
 City PHILADELPHIA State PA Zip Code 19103-6161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 16 / 2021
Transaction ID : AE81F61DB4A5A4AD9BF8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHAEFFER, ADELE, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 SOUTH 18TH STREET 2B
 City PHILADELPHIA State PA Zip Code 19103-6161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AB3A0262649844220B2E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1849 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHAEER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32388 DAHL DRIVE
 City TEMECULA State CA Zip Code 92592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AB0957CB4614E4E2B8D6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHATKO, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17810 24 MILE RD
 City MACOMB State MI Zip Code 48042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A34B023D1FF0A48FE9B3
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SCHEPACARTER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PEBBLE CREEK ROAD
 City DAYTON State NJ Zip Code 08810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRITON AIRWAYS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A8A861FB104E4400E9BD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1850 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHEPACARTER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 PEBBLE CREEK ROAD
 City DAYTON State NJ Zip Code 08810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRITON AIRWAYS, LLC Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AEEC9B83A54AA454D992
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 01 / 2021
Transaction ID : AAFB2B8AB676B4183AC9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2021
Transaction ID : AF60259BCEBC94CCFBAE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1851 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 01 / 2021
Transaction ID : AB193325D9EAA4124A88
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A785DC530B8DB4831893
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A25F4279B0C004E1CA88
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1852 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2021
Transaction ID : AEB705FD996654C348AE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AA69F69A68A564817873
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHEUMANN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 653 APPALOOSA TRAIL
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEMPEST HOMES Occupation (for Individual) HOMEBUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A4B0691FD0CD045D3BC6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1853 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILB, NORM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 N 16TH ST

City CLARINDA	State IA	Zip Code 51632
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) APPLIANCE SALES AND SERVICE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2021

Transaction ID : AC4294C77303D4C078E5

Amount of Each Receipt this Period
35.00

Memo Item

B. SCHILB, NORM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 N 16TH ST

City CLARINDA	State IA	Zip Code 51632
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) APPLIANCE SALES AND SERVICE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2021

Transaction ID : ABF0AFBBBA402494D968

Amount of Each Receipt this Period
25.00

Memo Item

C. SCHILB, NORM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 N 16TH ST

City CLARINDA	State IA	Zip Code 51632
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) APPLIANCE SALES AND SERVICE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2021

Transaction ID : A0D8311B79AB74AD0B58

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1854 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 16 / 2021
Transaction ID : A87904F14FB794A03A93
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 18 / 2021
Transaction ID : A4635EF32CEA94EDB9A0
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 03 / 23 / 2021
Transaction ID : A71E3B032335248D5884
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1855 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **03 / 24 / 2021**
Transaction ID : A01B246A332B344189B6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt **04 / 16 / 2021**
Transaction ID : AFF710EB13ED4403AAF2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : AFEDD0C9FA2A04C2C86E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1856 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A2690DFEF5C7848B2933
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt **04 / 24 / 2021**
Transaction ID : ADBB9782109E046858DB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt **05 / 16 / 2021**
Transaction ID : A79572C42868C45A586E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1857 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A31BB15E3510444FCA27
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 23 / 2021
Transaction ID : AA4886AA001434297889
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A3507F92773BB44C6B97
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1858 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A56C3842B9C93474990E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A65FD85A3EA7E40C8AEB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 780.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A8B6C5FB9696B4EA997B
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

95.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1859 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILB, NORM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 N 16TH ST
 City CLARINDA State IA Zip Code 51632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) APPLIANCE SALES AND SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 815.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AD125C63A69614F1B9EC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHILD, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11817 SPIRAL PASS
 City CINCINNATI State OH Zip Code 45249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHILD ENTERPRISES LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 19 / 2021
Transaction ID : ACD7E1E07F3F742F1B6F
 Amount of Each Receipt this Period 250.00
 Memo Item

C. SCHILD, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11817 SPIRAL PASS
 City CINCINNATI State OH Zip Code 45249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHILD ENTERPRISES LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 19 / 2021
Transaction ID : A9E1C570DF36148FF894
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1860 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILD, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11817 SPIRAL PASS

City CINCINNATI	State OH	Zip Code 45249
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHILD ENTERPRISES LLC	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2021

Transaction ID : A98AAB63F68E74233B86

Amount of Each Receipt this Period
250.00

Memo Item

B. SCHILD, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11817 SPIRAL PASS

City CINCINNATI	State OH	Zip Code 45249
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHILD ENTERPRISES LLC	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2021

Transaction ID : AE36350BE453D4745875

Amount of Each Receipt this Period
250.00

Memo Item

C. SCHILD, DALE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11817 SPIRAL PASS

City CINCINNATI	State OH	Zip Code 45249
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHILD ENTERPRISES LLC	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2021

Transaction ID : AF48E5AB714FC4B62A42

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1861 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHILD, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11817 SPIRAL PASS
 City CINCINNATI State OH Zip Code 45249
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SCHILD ENTERPRISES LLC Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A4671166B4CA44AB6956
 Amount of Each Receipt this Period 250.00
 Memo Item

B. SCHILLINGER, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8265 NORTH VAN DYKE ROAD
 City PORT AUSTIN State MI Zip Code 48467
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) UNITED SHORTLINEINS.COM Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A649AD199D9D84279868
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHIRMER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6088 PFAFFLIN LAKE BLVD
 City NEWBURGH State IN Zip Code 47630
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) ETFCU Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A07985025F8EB4D2A991
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1862 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHLEIER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5007 SHOAL CREEK ROAD
 City SUFFOLK State VA Zip Code 23435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 11 / 2021**
Transaction ID : A95D405C48F914A0284A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCHLEIER, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5007 SHOAL CREEK ROAD
 City SUFFOLK State VA Zip Code 23435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 11 / 2021**
Transaction ID : A202CBD7C46F54886AB5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHLOEMAN, JAMES, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 544 CONWAY VILLAGE DR
 City SAINT LOUIS State MO Zip Code 63141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A3914D32674914B66B48
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1863 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHLOESSER, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1132 GREENWAY ROAD
 City ALEXANDRIA State VA Zip Code 22308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN COUNCIL OF ENGINEERING COMPAN Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : AD9857254C70E4A2FB69
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SCHMIDT, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9655 SE 250TH AVE
 City DAMASCUS State OR Zip Code 97089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : AEED57C98D09A460AAA7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHMIDT, COLLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9655 SE 250TH AVE
 City DAMASCUS State OR Zip Code 97089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : A55E095C6EB824599892
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1864 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHMIDT, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 AMERICAS WAY #9357
 City BOX ELDER State SD Zip Code 57719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AF157F1FEFB264954A75
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHMIDT, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 377
 City KLAWOCK State AK Zip Code 99925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LOGGER'S WIFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 21 / 2021
Transaction ID : A100EA0E1AE6145DB89B
 Amount of Each Receipt this Period 200.00
 Memo Item

C. SCHNEIDER, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 SW 57 STREET
 City CAPE CORAL State FL Zip Code 33914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2021
Transaction ID : A685F1D4E7E4F435188E
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1865 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHNEIDER, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1215 SW 57 STREET
 City CAPE CORAL State FL Zip Code 33914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2021
Transaction ID : AEE483DC621694063800
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCHOEN, DENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 306
 21082 HWY 281
 City SMITH CENTER State KS Zip Code 66967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SCHOEN FUMIGATION INC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AE57956769A3F4EA686A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHOENFELD, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 854
 City GENEVA State OH Zip Code 44041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN EAGLE MORTGAGE, A DIVISION OF Occupation (for Individual) MORTGAGE LOAN ADVISER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A750BD19B034E441D856
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1866 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHOENLY, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5281 N OLD DIXIE HWY
 City FORT PIERCE State FL Zip Code 34946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 15 / 2021
Transaction ID : A2DCE649BBA7A4C9A8E5
 Amount of Each Receipt this Period 500.00
 Memo Item

B. SCHOWENGERDT, ERIC, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 387 ESIERRA MADRE BLVD
 City SIERRA MADRE State CA Zip Code 91024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DH JUSTIN Occupation (for Individual) CLAIMS ADJUSTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 29 / 2021
Transaction ID : A501441E32C6D4924B6F
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SCHRAMM, KATHRYN, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6225 W 10050 N ST
 City HIGHLAND State UT Zip Code 84003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AF69938E71BF744A6A68
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	635.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1867 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHRAMM, KATHRYN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6225 W 10050 N ST
 City HIGHLAND State UT Zip Code 84003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **05 / 29 / 2021**
Transaction ID : A82275549D8BF40C6827
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHRAMM, KATHRYN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6225 W 10050 N ST
 City HIGHLAND State UT Zip Code 84003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : AD88FD3488551463493D
 Amount of Each Receipt this Period 10.00
 Memo Item

C. SCHRAMM, KATHRYN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6225 W 10050 N ST
 City HIGHLAND State UT Zip Code 84003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **06 / 29 / 2021**
Transaction ID : A1863BE397F01450F845
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1868 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHREYER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 189 KINDERKAMACK RD
 City WESTWOOD State NJ Zip Code 07675-2289
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : A9DB981348EC74421828
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCHREYER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 189 KINDERKAMACK RD
 City WESTWOOD State NJ Zip Code 07675-2289
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : AE7BBFF7CAB24462BA66
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHROEDER, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8901 EAST CHENANGO AVE.
 City GREENWOOD VILLAGE State CO Zip Code 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : A7E24E2C195EC42AFB96
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1869 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHUBERT, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9850 GARFIELD AVE
 74
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A728EB0216E024769BE7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHUH, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2837 FLIGHT SAFETY DRIVE
 City VERO BEACH State FL Zip Code 32960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2021
Transaction ID : A44D6F36D42D847C6B61
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SCHUH, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2837 FLIGHT SAFETY DRIVE
 City VERO BEACH State FL Zip Code 32960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A24B6F7D24FB84BD5BF5
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1870 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHUH, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4495 SW BOWSPRIT DR.
 City LEES SUMMIT State MO Zip Code 64082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPEC BUILDING MATERIAL Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : ADC9D67BFEF514D0FA3D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCHULZE, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2107 SANTA ANITA RD
 City NORCO State CA Zip Code 92860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIF ARCHITECTURAL MILLWORK SUPPLY IN Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A5999F8B0C46A4D408F2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHULZ, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5111 FAIRCHILD AVE
 City FAIRBANKS State AK Zip Code 99709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RENTER/LANDLORD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A65A46CA7FEF842DFB3B
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1871 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHUMACHER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 SHOREWOOD DR
 City TAVARES State FL Zip Code 32778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HOME MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A56680C53CA4D4DBBED
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SCHUMACHER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 SHOREWOOD DR
 City TAVARES State FL Zip Code 32778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HOME MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A9E039403C92E4DBDA0B
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SCHUTT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 WREN DR.
 City BECHTELSVILLE State PA Zip Code 19505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A6DCF435DF3BD48C88C3
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1872 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHUTZER, ELLIOT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 WEST 6TH ST
 City LOS ANGELES State CA Zip Code 90057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : AFE04E4671D5C4C5A8D3
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SCHUTZER, ELLIOT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 WEST 6TH ST
 City LOS ANGELES State CA Zip Code 90057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A8C2C8B5798FB47F2989
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SCHUTZER, ELLIOT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 WEST 6TH ST
 City LOS ANGELES State CA Zip Code 90057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : AB977CDE66DFE426AB46
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1873 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHUTZER, ELLIOT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 WEST 6TH ST
 City LOS ANGELES State CA Zip Code 90057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : AF12567008F6A4EA5B84
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SCHWALBE, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7298 SOUTH US HWY 45
 City OSHKOSH State WI Zip Code 54902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A0A2A1D03B5114C1D8A7
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. SCHWARTZ, HELGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 N TAMIAMI TRAIL APARTMENT 1115
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : AA1B45323F7F34443B66
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1874 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHWARTZ, HELGA, , ,

Mailing Address 800 N TAMIAMI TRAIL APARTMENT 1115

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2021

Transaction ID : A9791F9070EE34B4DA4C

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHWARTZ, HELGA, , ,

Mailing Address 800 N TAMIAMI TRAIL APARTMENT 1115

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2021

Transaction ID : A860986D6581C43A7BC2

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHWARTZ, HELGA, , ,

Mailing Address 800 N TAMIAMI TRAIL APARTMENT 1115

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2021

Transaction ID : A72990227914F41F3B8E

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1875 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCHWEIKERT, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7025 KIRCHER RD

City COLUMBIA	State MO	Zip Code 65202
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) LAND SURVEYOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021

Transaction ID : AA38A4103D24E4402AE1

Amount of Each Receipt this Period
 35.00

Memo Item

B. SCOTT, DR MAURICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1796 VIA NATAL

City SAN LORENZO	State CA	Zip Code 94580
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021

Transaction ID : A3E47F45AE6874922A3F

Amount of Each Receipt this Period
 35.00

Memo Item

C. SCOTT, FRANKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1717 CHESTNUT AVE

City DALHART	State TX	Zip Code 79022
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021

Transaction ID : ADF2C86452FCD4ED4AAB

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1876 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCOTT, FRANKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 CHESTNUT AVE
 City DALHART State TX Zip Code 79022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A6DF8C72E41904CE0864
 Amount of Each Receipt this Period 15.00
 Memo Item

B. SCOTT, FRANKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 CHESTNUT AVE
 City DALHART State TX Zip Code 79022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A300BB2544F33420EB75
 Amount of Each Receipt this Period 15.00
 Memo Item

C. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A9A2B269CAE244C9C972
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 55.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1877 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : AB76803C696FC405595A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2021
Transaction ID : A3E7A1EC7118C44358D6
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : A5869A491DBDF41208FA
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1878 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A5C9C3A3EA6F84939955
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A47CF89874A3B4C6C9C7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : A360D6F50EBAA453FA1E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1879 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : AAE5895A5AACF4801BD6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **05 / 30 / 2021**
Transaction ID : AF628159D08BA4794A0D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCOTT, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5094 TEN MILE PL.
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : AC892C6769F1A47F0977
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1880 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCOTT, JOAN, , ,

Mailing Address 5094 TEN MILE PL.

City CASTLE ROCK State CO Zip Code 80108

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt
06 / 28 / 2021
Transaction ID : A4581586171404A1284D

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCOTT, JOAN, , ,

Mailing Address 5094 TEN MILE PL.

City CASTLE ROCK State CO Zip Code 80108

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt
06 / 30 / 2021
Transaction ID : A9AB138B0531D4B8C8BE

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCOTT, MIRIAM, G, MS,

Mailing Address 1770 AVENIDA DEL MUNDO UNIT 108

City CORONADO State CA Zip Code 92118

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 23 / 2021
Transaction ID : AD706F4E84873475FBFE

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1881 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCOTT, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8623 PASATIEMPO CIRCLE
 City ROSEVILLE State CA Zip Code 95747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : A5D34C4EA0EFE44F1ACB
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SCOTT, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8623 PASATIEMPO CIRCLE
 City ROSEVILLE State CA Zip Code 95747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : AAD722CD53219468D9EF
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SCOTT, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8623 PASATIEMPO CIRCLE
 City ROSEVILLE State CA Zip Code 95747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : AE443A811D67E46F5BB0
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1882 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCOTT, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8623 PASATIEMPO CIRCLE
 City ROSEVILLE State CA Zip Code 95747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A9FB85DF28448436B9BB
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SCOTT, WILMA, JEAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5747 W. MISSOURI AV.#1
 City GLENDALE State AZ Zip Code 85301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIED VAN LINES Occupation (for Individual) MOVE CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : ACD5BB919BF8948358BA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A4FD5D1F33B5D4E199AD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1883 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 10 / 2021
Transaction ID : A47A3F64AA1194F58B44
 Amount of Each Receipt this Period 5.00
 Memo Item

B. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 19 / 2021
Transaction ID : AAC29550D470A46AEB26
 Amount of Each Receipt this Period 15.00
 Memo Item

C. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 23 / 2021
Transaction ID : A2ECC83FFE9F84119A22
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1884 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22400 N MERIDIAN

City EDMOND	State OK	Zip Code 73025
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021

Transaction ID : AFD77B51356404B3398A

Amount of Each Receipt this Period
35.00

Memo Item

B. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22400 N MERIDIAN

City EDMOND	State OK	Zip Code 73025
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2021

Transaction ID : AE0CD044451A54D16BFB

Amount of Each Receipt this Period
5.00

Memo Item

C. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22400 N MERIDIAN

City EDMOND	State OK	Zip Code 73025
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021

Transaction ID : AF140215DAC4B4258B19

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1885 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A2C308285B05B45CB879
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt **05 / 01 / 2021**
Transaction ID : AE9B26365D522424FB99
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt **05 / 10 / 2021**
Transaction ID : A842EC11725944396AB4
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1886 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AC613113CE35F496CA6C
 Amount of Each Receipt this Period 15.00
 Memo Item

B. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : AA11B24F408B043A7A75
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A8BDF5CFB9A1C447B91F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1887 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AAB35BF582A7C4EE8AD9
 Amount of Each Receipt this Period 5.00
 Memo Item

B. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A0F8F2477BCE64770A54
 Amount of Each Receipt this Period 15.00
 Memo Item

C. SCRUDDER, NELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22400 N MERIDIAN
 City EDMOND State OK Zip Code 73025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AB8C897EB05B946408DD
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1888 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEALY, DENNISE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1233 STONEBRIDGE DRIVE
 City LODI State CA Zip Code 95242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : AC1464F92E94345AB83C
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. SEARLE, JANICE, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5277Y OLD MILL RD
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A1024F451C6804E9A9E2
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. SEARLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 495
 City UNION CITY State CA Zip Code 94587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A84FE5D0AAE054947A72
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1889 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEARLE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 495
 City UNION CITY State CA Zip Code 94587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FINANCIAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A4FDD5F3C8681437D91D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SEARS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 WEST 5TH STREET
 City SAN SIMON State AZ Zip Code 85632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 04 / 26 / 2021
Transaction ID : A300E97E2634C477FBC0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SEARS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 WEST 5TH STREET
 City SAN SIMON State AZ Zip Code 85632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A2AC2EE01F2914C51971
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1890 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEARS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 WEST 5TH STREET
 City SAN SIMON State AZ Zip Code 85632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A1FA18ADA87864F0AB64
 Amount of Each Receipt this Period 10.00
 Memo Item

B. SEARS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 WEST 5TH STREET
 City SAN SIMON State AZ Zip Code 85632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A0C03EA429DC248F696B
 Amount of Each Receipt this Period 10.00
 Memo Item

C. SEARS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 WEST 5TH STREET
 City SAN SIMON State AZ Zip Code 85632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AEA64E9F950D045A5A13
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

45.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1891 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEARS, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2285 WEST 5TH STREET
 City SAN SIMON State AZ Zip Code 85632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 03 / 2021
Transaction ID : ABC3AF6B92E9645B6A5A
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SEAY, GAY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16134 COUNTY ROAD 23
 City PLATTEVILLE State CO Zip Code 80651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.75

Date of Receipt 06 / 19 / 2021
Transaction ID : A1DD166748EB54CFEB2E
 Amount of Each Receipt this Period 5.00
 Memo Item

C. SEEWALD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2211 PECAN DRIVE
 City SAVANNAH State GA Zip Code 31404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A11CDE6D47DC5455E904
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 1892 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEGAL, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 BARREN HILL ROAD
 City CONSHOHOCKEN State PA Zip Code 19428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHBRIDGE Occupation (for Individual) CHIROPRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021
Transaction ID : A959F22CA60BF475984E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SEGAL, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 BARREN HILL ROAD
 City CONSHOHOCKEN State PA Zip Code 19428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HEALTHBRIDGE Occupation (for Individual) CHIROPRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A74C1EDD03AA84AC3999
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SEITER, JOHN, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3293 PADARO LANE
 City CARPINTERIA State CA Zip Code 93013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AB7E016CCFF9944398F8
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1893 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SELIGER, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 BENTREE CIRCLE
 City ANCHORAGE State AK Zip Code 99504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2021
Transaction ID : A868DA29A444941F68D6
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. SELIGER, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 BENTREE CIRCLE
 City ANCHORAGE State AK Zip Code 99504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2021
Transaction ID : A2CA5EB69C71D4ABDB3E
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. SELIGER, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 BENTREE CIRCLE
 City ANCHORAGE State AK Zip Code 99504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2021
Transaction ID : AE26875151EF649658D9
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 600.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1894 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SELIGER, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 BENTREE CIRCLE
 City ANCHORAGE State AK Zip Code 99504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A6E9E015F0ED94C3A8A5
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. SELIGER, PENNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 BENTREE CIRCLE
 City ANCHORAGE State AK Zip Code 99504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A8C194AC0EF1741C9B97
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. SENNET, TOBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 FAULKNER PLACE
 City KENNESAW State GA Zip Code 30152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2021
Transaction ID : A660FA1CAE820450482A
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	435.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 1895 OF 3012
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SENNET, TOBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1005 FAULKNER PLACE
City KENNESAW State GA Zip Code 30152
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 245.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A174B2438DEF44C3B905
Amount of Each Receipt this Period 35.00
Memo Item

B. SENNET, TOBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1005 FAULKNER PLACE
City KENNESAW State GA Zip Code 30152
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 280.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A18E3E89FAEDD47D0BB4
Amount of Each Receipt this Period 35.00
Memo Item

C. SENNET, TOBY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1005 FAULKNER PLACE
City KENNESAW State GA Zip Code 30152
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 315.00

Date of Receipt 05 / 05 / 2021
Transaction ID : AF905ECA4B6AE46CFA0C
Amount of Each Receipt this Period 35.00
Memo Item

SUBTOTAL of Receipts This Page (optional) 105.00
TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1896 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SENNET, TOBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 FAULKNER PLACE
 City KENNESAW State GA Zip Code 30152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : AF60053A0AF5D47319AC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SENN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25680 BARNCREST LANE
 City ALDIE State VA Zip Code 20105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : AFA5FB78B933D4426AAF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SENN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25680 BARNCREST LANE
 City ALDIE State VA Zip Code 20105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : A17A10AFFEB2F4898B12
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1897 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEPT, WALLACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8602

City MISSOULA	State MT	Zip Code 59807
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : AE9620B551C0C41FAB13

Amount of Each Receipt this Period
1000.00

Memo Item

B. SERAPHIN, ROCHENER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 SW 14TH ST

City PEMBROKE PINES	State FL	Zip Code 33025
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : AE4FCA0DAB925400A99A

Amount of Each Receipt this Period
35.00

Memo Item

C. SERVOSS, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9017

City NAPLES	State FL	Zip Code 34101
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIANE T SERVOSS MD	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : AC03FE7B8900A4CA6826

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1085.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1898 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SERVOSS, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9017
 City NAPLES State FL Zip Code 34101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DIANE T SERVOSS MD Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 13 / 2021**
Transaction ID : AB1C9232ADA594032B78
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SEUBERT, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12859 HWY 9 STE 600
 City ALPHARETTA State GA Zip Code 30004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : A7536FF2E750B4C37A3D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SEUBERT, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12859 HWY 9 STE 600
 City ALPHARETTA State GA Zip Code 30004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : AF61ED048A10E459FBA1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1899 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEWALL, WILLIAM, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 21
 City WHITE MARSH State VA Zip Code 23183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A648AC8FA70A84466A36
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. SEWARD, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1919 WILLOWGREEN DR
 City DAYTON State OH Zip Code 45432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2021
Transaction ID : A096BE2F17A7B4EE7A34
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. SHADRICK, IRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 OGDEN ST
 City JEKYLL ISLAND State GA Zip Code 31527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2021
Transaction ID : A1D29377720E249B8B52
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1900 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHAFFER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15552 OPUS ONE DR
 City BAKERSFIELD State CA Zip Code 93314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **03 / 16 / 2021**
Transaction ID : A3B333EFF27144591877
 Amount of Each Receipt this Period 500.00
 Memo Item

B. SHAFFER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15552 OPUS ONE DR
 City BAKERSFIELD State CA Zip Code 93314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : AA3A9E5BB67FD4A2E90D
 Amount of Each Receipt this Period 500.00
 Memo Item

C. SHAFFER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15552 OPUS ONE DR
 City BAKERSFIELD State CA Zip Code 93314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : A33BA9581B2034393813
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1901 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHAFFER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15552 OPUS ONE DR
 City BAKERSFIELD State CA Zip Code 93314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RESTAURANT OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : ABD72FDBA539647DA9FD
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. SHAIER, LEON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 BRIDLEWOOD DRIVE
 City BRANDON State MS Zip Code 39047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : A13B6FED058AF4FA0BB7
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. SHAMES, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 MURRAY AVENUE
 City LARCHMONT State NY Zip Code 10538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A7BA98B3ECA314E91894
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1902 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHAMP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 SILICA ROAD
 City SYLVANIA State OH Zip Code 43560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FUSE TECH/HOT TECH GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021
Transaction ID : AB97602BA185841DDA04
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SHAMP, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 SILICA ROAD
 City SYLVANIA State OH Zip Code 43560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FUSE TECH/HOT TECH GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : A986B810B22194FE3BBC
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SHANAHAN, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2425 N CENTER STREET
 City HICKORY State NC Zip Code 28601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : AF126CF61FF284D2FBE8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1903 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHANAHAN, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2425 N CENTER STREET
 City HICKORY State NC Zip Code 28601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2021
Transaction ID : A7246899D570547C68DB
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SHANNON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 329 BOSTON POST ROAD
 City SUDBURY State MA Zip Code 01776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHANNON CORPORATION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : A651701ECDFE545D69EC
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. SHARPE, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 GREENS EDGE DR
 City KINGWOOD State TX Zip Code 77339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : AF340F8564E1B4D5EA48
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1904 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHARPE, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 GREENS EDGE DR
 City KINGWOOD State TX Zip Code 77339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A68EF4C0921B2409A964
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SHAW, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17578 W. SPRING LANE
 City SURPRISE State AZ Zip Code 85388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTWRIGHT SCHOOL DISTRICT Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2021
Transaction ID : AA6095DF141CE4463B74
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SHAW, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17578 W. SPRING LANE
 City SURPRISE State AZ Zip Code 85388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARTWRIGHT SCHOOL DISTRICT Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A4BD3671820634AE5B2D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1905 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHAW, EDWINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815-11 MARLOWE ROAD
 City RALEIGH State NC Zip Code 27609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 11 / 2021**
Transaction ID : ADA8FD2121BF94352BE9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SHAW, EDWINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815-11 MARLOWE ROAD
 City RALEIGH State NC Zip Code 27609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **06 / 11 / 2021**
Transaction ID : AD008EA2D94834218875
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SHAW, TAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 CREEKWOOD COURT
 City WINDER State GA Zip Code 30680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERCER TRANSPORTATION Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **06 / 23 / 2021**
Transaction ID : A41D8DF58350248189BE
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1906 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHAW, TAMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 CREEKWOOD COURT
 City WINDER State GA Zip Code 30680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERCER TRANSPORTATION Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A60D51563B2384773ACF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SHEA, HEATHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 CANTERWOOD DR
 City MULBERRY State FL Zip Code 33860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A7F7A7D74CD3348B9BBB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SHELBY, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7176 ANDERSON RD
 City FAIRVIEW State TN Zip Code 37062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION COMPANY OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : ABE4D3843BA18400199E
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1907 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHELBY, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7176 ANDERSON RD
 City FAIRVIEW State TN Zip Code 37062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION COMPANY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A1848F190C0C749B2900
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SHELBY, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7176 ANDERSON RD
 City FAIRVIEW State TN Zip Code 37062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSTRUCTION COMPANY OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : ABAF627C25C1846A6BE0
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SHELDON, FLORITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 E WALNUT AVE
 45
 City ORANGE State CA Zip Code 92867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUFG Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : AB3A768B5934040A3A59
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1908 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHELDON, FLORITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 E WALNUT AVE
 45
 City ORANGE State CA Zip Code 92867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUFG Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : AABD9FEFD48F34AD2958
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. SHELDON, FLORITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 E WALNUT AVE
 45
 City ORANGE State CA Zip Code 92867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUFG Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : AF4C32B1DE4C146F49D0
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. SHELDON, FLORITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 E WALNUT AVE
 45
 City ORANGE State CA Zip Code 92867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUFG Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A63871E64C1DE4772B4B
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

300.00
 75.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1909 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHELDON, FLORITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2720 E WALNUT AVE
 45
 City ORANGE State CA Zip Code 92867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUFG Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : ADAB5F844E0BA4E0AB67
 Amount of Each Receipt this Period 75.00
 Memo Item

B. SHELTON, GEORGE, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4124 KINGSFERRY DR.
 City ARLINGTON State TX Zip Code 76016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A55B614D3E5C2486DB41
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SHEPARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2177 BUFORD DAM ROAD
 City BUFORD State GA Zip Code 30518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUNTAIRE FARMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 26 / 2021
Transaction ID : ADBB5F6DA8210411FB0F
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1910 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHEPARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2177 BUFORD DAM ROAD
 City BUFORD State GA Zip Code 30518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUNTAIRE FARMS Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 26 / 2021**
Transaction ID : A1D137D6A355542EE8AF
 Amount of Each Receipt this Period 250.00
 Memo Item

B. SHEPHERD, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 AMBAR PLACE
 City BERNARDSVILLE State NJ Zip Code 07924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : A7882E9D8C2264B7BB7D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SHEPHERD, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 AMBAR PLACE
 City BERNARDSVILLE State NJ Zip Code 07924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 29 / 2021**
Transaction ID : A76C6C142A0F84F2A952
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1911 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHEPHERD, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 AMBAR PLACE

City BERNARDSVILLE	State NJ	Zip Code 07924
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : A59F55A4F3FB144F78D7

Amount of Each Receipt this Period
50.00

Memo Item

B. SHERF, SHAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2936 N 36 ST.

City PHOENIX	State AZ	Zip Code 85018
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2021

Transaction ID : A22B153ACAF4041FAAED

Amount of Each Receipt this Period
35.00

Memo Item

C. SHERFY, BETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1123 FOX RUN CIRCLE

City NEW BRAUNFELS	State TX	Zip Code 78130
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2021

Transaction ID : A9F17FD6396064ADDB58

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1912 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHERMAN, ETHEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 BARBEAU ST
 City SAULT SAINTE MARIE State MI Zip Code 49783
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A255F4A31F72545579CF
 Amount of Each Receipt this Period 10.00
 Memo Item

B. SHERWOOD, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85625 MOLVENA
 City INDIO State CA Zip Code 92203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A04715F9EE48B4F28AD6
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SHEWMAKER, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20164 BOXWOOD PLACE
 City ASHBURN State VA Zip Code 20147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWN'S FAIRFAX MAZDA Occupation (for Individual) USED CAR SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A494325EB64304A6A945
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1913 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHIFLET, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2858 22ND CT.
 City KINGSBURG State CA Zip Code 93631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AE81F1E9820F547BC9F7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SHIFLETT, MARGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3321 SUE MAC CT
 City MONROVIA State MD Zip Code 21770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : AB05C04EC8B214C2E85A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SHIFLETT, MARGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3321 SUE MAC CT
 City MONROVIA State MD Zip Code 21770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AD0066ED7B92E4FF6893
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1914 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHINE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 ASPEN DR
 City DOWNINGTOWN State PA Zip Code 19335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHINE ASSOCIATES Occupation (for Individual) CONSULTANT - HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A1D9621DCC0BB45DDBF5
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SHIOYA, KUNITAKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 DUNNVILLE WAY
 City HOLLISTER State CA Zip Code 95023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2021
Transaction ID : A179B8A61BD984C05970
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SHIOYA, KUNITAKA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6500 DUNNVILLE WAY
 City HOLLISTER State CA Zip Code 95023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A0E23A66235BC424E841
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1915 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHLAPAK, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4645 STONEMEADE CT.
 City ATLANTA State GA Zip Code 30331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : A644EA40E7E374B8FAB6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SHLAPAK, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4645 STONEMEADE CT.
 City ATLANTA State GA Zip Code 30331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2021
Transaction ID : AF3D46D94EB4347648D8
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SHLAPAK, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4645 STONEMEADE CT.
 City ATLANTA State GA Zip Code 30331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A828677DA1FD24EF4B1A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1916 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHLAPAK, MILTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4645 STONEMEADE CT.
 City ATLANTA State GA Zip Code 30331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A72754F291C4D4C9E9B9
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SHOCKLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1493 E. SAN BERNARDINO AVE
 City SAN BERNARDINO State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SHOCKLEY ENGINEERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : AFA115170B68644CBBAC
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SHOCKLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1493 E. SAN BERNARDINO AVE
 City SAN BERNARDINO State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SHOCKLEY ENGINEERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AFA0CF35302BC4D93B40
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1917 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHORE, MARION, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3666 N MESSICK RD
 City NEW CASTLE State IN Zip Code 47362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A33E5827CFFF74A34938
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SHORR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1069 BANGOR LANE
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A39F9428E58BD43839E7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SHORR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1069 BANGOR LANE
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A39FB38F6AF4049C994F
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1918 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHORR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1069 BANGOR LANE
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AE3386770218F475A8E2
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SHORR, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1069 BANGOR LANE
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A9FBFEC46422941C2A4A
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SHORT, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30043 DOLIVE RIDGE
 City SPANISH FORT State AL Zip Code 36527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CELLULOSE SOLUTIONS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : A91CD307A3791408C849
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1919 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHORT, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30043 DOLIVE RIDGE

City SPANISH FORT	State AL	Zip Code 36527
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CELLULOSE SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2021

Transaction ID : AFEF3C6CAFEA54190BBA

Amount of Each Receipt this Period
50.00

Memo Item

B. SHORT, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30043 DOLIVE RIDGE

City SPANISH FORT	State AL	Zip Code 36527
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CELLULOSE SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2021

Transaction ID : A1BC9B8B7FD5B4B39BAF

Amount of Each Receipt this Period
50.00

Memo Item

C. SHORT, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30043 DOLIVE RIDGE

City SPANISH FORT	State AL	Zip Code 36527
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CELLULOSE SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2021

Transaction ID : AC08230FBE898444C830

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1920 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHORT, ALLAN, , ,

Mailing Address 30043 DOLIVE RIDGE

City SPANISH FORT	State AL	Zip Code 36527
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CELLULOSE SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021

Transaction ID : A98B03C8A37194811A30

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SHORT, ALLAN, , ,

Mailing Address 30043 DOLIVE RIDGE

City SPANISH FORT	State AL	Zip Code 36527
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CELLULOSE SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021

Transaction ID : A69BD54E664EC40B2A42

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SHORT, ALLAN, , ,

Mailing Address 30043 DOLIVE RIDGE

City SPANISH FORT	State AL	Zip Code 36527
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CELLULOSE SOLUTIONS	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021

Transaction ID : A858DAEF116CF4BB3BEA

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1921 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHORT, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30043 DOLIVE RIDGE
 City SPANISH FORT State AL Zip Code 36527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CELLULOSE SOLUTIONS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A19E130BCB716493294D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SHOWALTER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 DEWITT CIRCLE
 City THE VILLAGES State FL Zip Code 32163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDOR TECHNOLOGY INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A17E7A3603DEA461AA75
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SHOWALTER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3476 DEWITT CIRCLE
 City THE VILLAGES State FL Zip Code 32163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CANDOR TECHNOLOGY INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A19280D25446141559ED
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1922 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIAN, PIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 HARDIN LANE NE

City PALM BAY	State FL	Zip Code 32905-4630
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2021

Transaction ID : ACAA898572B994318A8A

Amount of Each Receipt this Period
25.00

Memo Item

B. SIAN, PIO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 HARDIN LANE NE

City PALM BAY	State FL	Zip Code 32905-4630
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : AC4FCC1F5B0FA48DE8C4

Amount of Each Receipt this Period
15.00

Memo Item

C. SIBERT, CLAUDIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 BEE SPRING RD

City DELLROSE	State TN	Zip Code 38453
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2021

Transaction ID : AEE43B1C07F584DDA82A

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1923 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIEBERS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9303 W PREECE ST
 City BOISE State ID Zip Code 83704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEYONDSOFT CONSULTING Occupation (for Individual) TEST ENGINEER II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A743E5207D0694C148A9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SIEBERS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9303 W PREECE ST
 City BOISE State ID Zip Code 83704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEYONDSOFT CONSULTING Occupation (for Individual) TEST ENGINEER II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AD9023B64BA344A32A45
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN
 City EASTPORT State ME Zip Code 04631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 17 / 2021
Transaction ID : A8F622227F144EEBB55
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1924 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN

City EASTPORT	State ME	Zip Code 04631
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021

Transaction ID : A2CE02D407E6A4C628E9

Amount of Each Receipt this Period
25.00

Memo Item

B. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN

City EASTPORT	State ME	Zip Code 04631
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2021

Transaction ID : AC9C9F111ACF6463597B

Amount of Each Receipt this Period
50.00

Memo Item

C. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN

City EASTPORT	State ME	Zip Code 04631
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021

Transaction ID : A78F83DA5DEB64895A3B

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1925 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN
 City EASTPORT State ME Zip Code 04631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 07 / 2021
Transaction ID : A19338CC75F5E4F65B57
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN
 City EASTPORT State ME Zip Code 04631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 29 / 2021
Transaction ID : AB111BBBB113248D6B78
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN
 City EASTPORT State ME Zip Code 04631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 07 / 2021
Transaction ID : AA089577303D748E788D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1926 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIEBERT, PHYLLIS, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 FRANKLIN
 City EASTPORT State ME Zip Code 04631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AE99ECFD77694463FA00
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SIERRA, ANGEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 SW 32 ST
 City MIAMI State FL Zip Code 33155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AF8502F2AA5D0468CAD2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SIKORSKI, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1206 BURNING BUSH LN
 City WEST CHESTER State PA Zip Code 19380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A2897C17EBCA14D5B958
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1927 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SILLARI, OLIVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 POPE ROAD
 City CONCORD State MA Zip Code 01742-5205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 07 / 2021
Transaction ID : ACA22EAD0878E4038B83
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SILL, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 557 FOREST RETREAT RD
 City HENDERSONVILLE State TN Zip Code 37075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A5A4BC8994DC34E44A4B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SILL, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 557 FOREST RETREAT RD
 City HENDERSONVILLE State TN Zip Code 37075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AB1664B06CEF241AB93C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1928 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SILVERMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 N. SERENATA DR.
 634
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINTER PROPERTIES, LLC Occupation (for Individual) REAL ESTATE AND CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 21 / 2021**
Transaction ID : A0DC1FACB0BDB4499BB:
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SILVERMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 N. SERENATA DR.
 634
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINTER PROPERTIES, LLC Occupation (for Individual) REAL ESTATE AND CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 21 / 2021**
Transaction ID : A3E9A9EFCF1E84AB1B1F
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SILVERMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 N. SERENATA DR.
 634
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINTER PROPERTIES, LLC Occupation (for Individual) REAL ESTATE AND CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 21 / 2021**
Transaction ID : ACEB4A5E0893F44ED88B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1929 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SILVERMAN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 N. SERENATA DR.
 634
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINTER PROPERTIES, LLC Occupation (for Individual) REAL ESTATE AND CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A30372DBF61F8459B93F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SIMMONS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 HAMPTON COVE WAY
 City OWENS CROSS ROADS State AL Zip Code 35763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 01 / 2021
Transaction ID : A087F56E1099F445EB94
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SIMMONS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 HAMPTON COVE WAY
 City OWENS CROSS ROADS State AL Zip Code 35763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 01 / 2021
Transaction ID : AB8296F7EA91A4FE6A66
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1930 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIMMONS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 HAMPTON COVE WAY
 City OWENS CROSS ROADS State AL Zip Code 35763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 01 / 2021**
Transaction ID : A2719CC78A5AE49FAAFB
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SIMMONS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 HAMPTON COVE WAY
 City OWENS CROSS ROADS State AL Zip Code 35763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 01 / 2021**
Transaction ID : AB5778A7DDEE9742FAA29
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SIMMONS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 HAMPTON COVE WAY
 City OWENS CROSS ROADS State AL Zip Code 35763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **06 / 12 / 2021**
Transaction ID : A05FAFA7975114F3D872
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1931 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIMOVITCH, RONA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1222 ROYAL PALM WAY
 City BOCA RATON State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLDWELL BANKER Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A1C40EA61458D49F59A6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SIMPSON, CLINT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S 550 E
 City DIETRICH State ID Zip Code 83324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 10 / 2021
Transaction ID : A5E5EF4782EFA443B933
 Amount of Each Receipt this Period 70.00
 Memo Item

C. SIMPSON, CLINT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S 550 E
 City DIETRICH State ID Zip Code 83324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 04 / 10 / 2021
Transaction ID : A0622C70A2CD144A9A21
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1932 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIMPSON, CLINT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S 550 E
 City DIETRICH State ID Zip Code 83324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 05 / 10 / 2021
Transaction ID : ACA71D56D864B48EB9B2
 Amount of Each Receipt this Period 70.00
 Memo Item

B. SIMPSON, CLINT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S 550 E
 City DIETRICH State ID Zip Code 83324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 470.00

Date of Receipt 06 / 10 / 2021
Transaction ID : ADE44C20785AB42C380E
 Amount of Each Receipt this Period 70.00
 Memo Item

C. SINKOVICH, ELLEN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2010 PINE ST RD 3
 City POTTSVILLE State ID Zip Code PA 17901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 02 / 22 / 2021
Transaction ID : A467A2E49ABB044718BB
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	340.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1933 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SINKOVICH, ELLEN, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2010 PINE ST RD 3
 City POTTSVILLE State PA Zip Code 17901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : A898E813DA07F438B92E
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : A80D8D31635E349A1849
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : A25D3C67531BD496EA8A
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1934 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : A29CF4527B9DE42E9A3A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 28 / 2021**
Transaction ID : A32D34DEFD59848D3B18
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : AEF967F405888497085F
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1935 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A89AAAF1A58B4B26AF2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A0C0F391E6B4E40BDAA7
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SISEL, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SKYCREST DR
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A544A4AC3863844189A6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1936 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SITZ, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6203 COMPASS DR.
 City FLOWERY BRANCH State GA Zip Code 30542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIESSE AMERICA Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : ADED0B3593AD34DC7AB!
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SKAHEN, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 15TH AVE N
 City WAITE PARK State MN Zip Code 56387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AF49C412C6E7D46369EA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SKEELS, RICHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2039 W 700 S
 City ASHLEY State IN Zip Code 46705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ELECTRIC Occupation (for Individual) LEAD PROJECT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : AF081405903DE4605BBB
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1937 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SKEELS, RICHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2039 W 700 S
 City ASHLEY State IN Zip Code 46705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL ELECTRIC Occupation (for Individual) LEAD PROJECT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A3080A1F0064C47FBB32
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SKINNER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 WICKWARE RD
 City NEWTON State MS Zip Code 39345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2021
Transaction ID : AA22E14BF5B6D4B4198D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SKINNER, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 WICKWARE RD
 City NEWTON State MS Zip Code 39345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A3C4EE87FED934710AE8
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1938 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SKINNER, TRAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14012 AGATE DR
 City YUKON State OK Zip Code 73099-8269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAVIS SKINNER AGENCY INC Occupation (for Individual) INDEPENDENT INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A6582E19CD88E4E4999F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SKINNER, TRAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14012 AGATE DR
 City YUKON State OK Zip Code 73099-8269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRAVIS SKINNER AGENCY INC Occupation (for Individual) INDEPENDENT INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : ACC17421E9A5E46B1B02
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SKRAMSTED, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12660 WELSH LAKE TRAIL NW
 City CASS LAKE State MN Zip Code 56633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A912259C462224243BEB
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1939 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SKRAMSTED, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12660 WELSH LAKE TRAIL NW
 City CASS LAKE State MN Zip Code 56633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 26 / 2021**
Transaction ID : AAB6696CCA9694C33AF2
 Amount of Each Receipt this Period 15.00
 Memo Item

B. SKRAMSTED, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12660 WELSH LAKE TRAIL NW
 City CASS LAKE State MN Zip Code 56633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : AA51A7B89173644D5910
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SKRAMSTED, VERN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12660 WELSH LAKE TRAIL NW
 City CASS LAKE State MN Zip Code 56633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 26 / 2021**
Transaction ID : A581214FB17C647E9A35
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1940 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SKRIVSETH, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7726 ZANZIBAR LN N

City MAPLE GROVE	State MN	Zip Code 55311
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) HEALTHCARE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : A02F3BF8B8196413A800

Amount of Each Receipt this Period
50.00

Memo Item

B. SKRIVSETH, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7726 ZANZIBAR LN N

City MAPLE GROVE	State MN	Zip Code 55311
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) HEALTHCARE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : A15CD6AA57C2141B89AB

Amount of Each Receipt this Period
50.00

Memo Item

C. SLATTERY, SHANNON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 CASCADE VIEW DRIVE

City SEQUIM	State WA	Zip Code 98382
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A6AA2B32A5AC448A781F

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1941 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SLAYTON, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3507 63RD DR.
 City LUBBOCK State TX Zip Code 79413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL PRODUCER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **02 / 22 / 2021**
Transaction ID : A7E06813992C44931980
 Amount of Each Receipt this Period 225.00
 Memo Item

B. SLOAN, THOMAS, , , USCG RET.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8854 OLIVE RANCH LANE
 City FAIR OAKS State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLOAN WINTERS ORCHARDS Occupation (for Individual) ORGANIC FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **06 / 08 / 2021**
Transaction ID : A1E6E4CEB4189447CBF1
 Amount of Each Receipt this Period 15.00
 Memo Item

C. SLOAN, THOMAS, , , USCG RET.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8854 OLIVE RANCH LANE
 City FAIR OAKS State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLOAN WINTERS ORCHARDS Occupation (for Individual) ORGANIC FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : ACB7FAE6AF6B64086852
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	265.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1942 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SLOCUM, LOUISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14300 SEND 35 TH ST

City DAVIE.	State FL	Zip Code 33331
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : A492873EF17DC4CE8B99

Amount of Each Receipt this Period
50.00

Memo Item

B. SLOCUM, LOUISE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14300 SEND 35 TH ST

City DAVIE.	State FL	Zip Code 33331
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2021

Transaction ID : A7348F87A162B4F34B7B

Amount of Each Receipt this Period
50.00

Memo Item

C. SMALLEY, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12114 GLENCLIFF CIRCLE

City TAMPA	State FL	Zip Code 33626
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) BUSINESS BROKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2021

Transaction ID : A1D7A143AFC054B37B13

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1943 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMALL, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9743 TATTERSALL AVE
 City ORLANDO State FL Zip Code 32817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUTUAL GROUP INC Occupation (for Individual) PUBLIC ADJUSTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : AC590DEAF8B544FCEA78
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SMALL, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9743 TATTERSALL AVE
 City ORLANDO State FL Zip Code 32817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MUTUAL GROUP INC Occupation (for Individual) PUBLIC ADJUSTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : AABD11E8F162444BF852
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SMISEK, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1285 E WISCONSIN AVE
 City DELAND State FL Zip Code 32724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A7D980D28B70246E1A64
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1944 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2554 COLE ROAD S
 City SALEM State OR Zip Code 97306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOMAN INDUSTRIES Occupation (for Individual) BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A1F7CBDD501B14F0F825
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SMITH, DICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 LEONARD TRAIL 412
 City FORT WORTH State TX Zip Code 76114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : AF284649EA4394A3CBC2
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SMITH, ETHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 FERNWOOD CIRCLE
 City DAWSONVILLE State GA Zip Code 30534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : ADAF08EC534714F46986
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1945 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, ETHEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 FERNWOOD CIRCLE

City DAWSONVILLE	State GA	Zip Code 30534
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 05 / 2021
Transaction ID : AB9D4807A0F4B46E8BF8

Amount of Each Receipt this Period
 50.00

Memo Item

B. SMITH, FERDINAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 EAST AVE

City ROCHESTER	State NY	Zip Code 14618
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JAY ADVERTISING	Occupation (for Individual) CHAIRMAN MARKETING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 03 / 15 / 2021
Transaction ID : AAB597646665446E59AF

Amount of Each Receipt this Period
 100.00

Memo Item

C. SMITH, FERDINAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 EAST AVE

City ROCHESTER	State NY	Zip Code 14618
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JAY ADVERTISING	Occupation (for Individual) CHAIRMAN MARKETING
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 04 / 07 / 2021
Transaction ID : A3604132EED7A483CA6F

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1946 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, FERDINAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 EAST AVE
 City ROCHESTER State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAY ADVERTISING Occupation (for Individual) CHAIRMAN MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **05 / 07 / 2021**
Transaction ID : A61B1D9FE50C649BC90E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SMITH, FERDINAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 EAST AVE
 City ROCHESTER State NY Zip Code 14618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAY ADVERTISING Occupation (for Individual) CHAIRMAN MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **06 / 07 / 2021**
Transaction ID : A86EEF148BD924F5794F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **03 / 02 / 2021**
Transaction ID : A8CFD70D4F593418D8C9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1947 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **03 / 30 / 2021**
Transaction ID : A094DE7F43D0940A1820
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A070A2E60A0D84FC58B1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **04 / 09 / 2021**
Transaction ID : A0209F662364342F5B26
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1948 OF 3012
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, GARLAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 WEATHERMORE TRACE

City HOSCHTON	State GA	Zip Code 30548
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : A171EA5C439274BABA92

Amount of Each Receipt this Period
10.00

Memo Item

B. SMITH, GARLAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 WEATHERMORE TRACE

City HOSCHTON	State GA	Zip Code 30548
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2021

Transaction ID : AE0681503F8B7488680A

Amount of Each Receipt this Period
35.00

Memo Item

C. SMITH, GARLAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 WEATHERMORE TRACE

City HOSCHTON	State GA	Zip Code 30548
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2021

Transaction ID : A79F62618ED504929BD6

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1949 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A23EE5E1679654A279CA
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AA796366CE1CF459DBA1
 Amount of Each Receipt this Period 10.00
 Memo Item

C. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A51F49A1864284956891
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1950 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A499D7A74FDCF4A02AE8
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : A10B1256BFA0A417F9E2
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A90527959BEFA40DFA92
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1951 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, GARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 WEATHERMORE TRACE
 City HOSCHTON State GA Zip Code 30548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A545795B61B4648058FB
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SMITH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 373 SCHMUCK ROAD
 City SEQUIM State WA Zip Code 98382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : A7ABED385CD82447EAE5
 Amount of Each Receipt this Period 250.00
 Memo Item

C. SMITH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 APOLLO RD
 City ENGLISHTOWN State NJ Zip Code 07726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 01 / 2021
Transaction ID : A2DA977ADDE1D41AF94F
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 785.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1952 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, JOSEPH E, , ,

Mailing Address 5507 S US HIGHWAY 36

City MILANO	State TX	Zip Code 76556
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRAZO PAINTING	Occupation (for Individual) CONSTRUCTION SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2021

Transaction ID : A22418C2F42064B8DAB5

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, JOSEPH E, , ,

Mailing Address 5507 S US HIGHWAY 36

City MILANO	State TX	Zip Code 76556
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRAZO PAINTING	Occupation (for Individual) CONSTRUCTION SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

Transaction ID : AB84E773E85CE467D829

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, JOSEPH E, , ,

Mailing Address 5507 S US HIGHWAY 36

City MILANO	State TX	Zip Code 76556
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRAZO PAINTING	Occupation (for Individual) CONSTRUCTION SUPERINTENDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2021

Transaction ID : A5F23FC19F6964B8BA3B

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1953 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, JOSEPH E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5507 S US HIGHWAY 36
 City MILANO State TX Zip Code 76556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRAZO PAINTING Occupation (for Individual) CONSTRUCTION SUPERINTENDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 12 / 2021
Transaction ID : A9EB32334588245F4A0B
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SMITH, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 619 NW WATERFORD DRIVE
 City LAWTON State OK Zip Code 73505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A519671C3BE374D37A17
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SMITH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3403 BUTTONWOOD CT
 City REISTERSTOWN State MD Zip Code 21136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SMITH'S CERAMIC TILE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A7DC7BE851EFE4706930
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1954 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITJ, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7666 W DIVISION RD
 City LARWILL State IN Zip Code 46764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2021
Transaction ID : A1687494B560C462E860
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SNEED, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 RACQUET CLUB RD
 City ASHEVILLE State NC Zip Code 28803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN-LINKLE LAW FIRM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2021
Transaction ID : AAA577A59B4074C19BC2
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. SNEED, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 2ND AVE N SUITE B
 City NASHVILLE State TN Zip Code 37208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WASCO INC Occupation (for Individual) CONSTRUCTION CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A00EEA5165CFB481E9D6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1955 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SNEED, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1122 2ND AVE N SUITE B
 City NASHVILLE State TN Zip Code 37208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WASCO INC Occupation (for Individual) CONSTRUCTION CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A77515477C5B94DD1956
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SNELL, KIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 619 4TH ST SW
 City GRAND RAPIDS State MN Zip Code 55744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A2D6997D3837F4086962
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SNODGRASS, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. BOX 866473
 City PLANO State TX Zip Code 75086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AB775D228D76F40A7A37
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1956 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SNYDER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10412 SE 194TH PL
 City RENTON State WA Zip Code 98055-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) MACHINISTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : ACD12AEF50BD64E68B85
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SNYDER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10412 SE 194TH PL
 City RENTON State WA Zip Code 98055-7313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) MACHINISTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A86F673C00E4044D8994
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOUUDY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 05 / 2021
Transaction ID : A8DA1B01134FC4476863
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1957 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 10 / 2021**
Transaction ID : A44F3D3ADAE504F42AE2
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : AB0A65C67E88E4F47AF5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt **03 / 10 / 2021**
Transaction ID : A2CB0A3DF470E44D1B37
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1958 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 04 / 05 / 2021
Transaction ID : AA551F14C922041AF805
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A9AA9609BBA4449439CB
 Amount of Each Receipt this Period 10.00
 Memo Item

C. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 04 / 10 / 2021
Transaction ID : AFFEE30C2376146F2B7E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1959 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A0091DC7B209F4572847
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 05 / 10 / 2021
Transaction ID : AA5E377E7F58348039EE
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AA240180B88674BF7A3D
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1960 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOLARI, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2196 N FOU DY AVE.
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME WINDOW SYSTEMS, LLC Occupation (for Individual) DIRECTOR OF SALES U.S.
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 760.00

Date of Receipt 06 / 10 / 2021
Transaction ID : AC63C109EF5ED4932847
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SOMMER, JUNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1114 GUINEA DRIVE
 City HOUSTON State TX Zip Code 77055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A63E0CEBA40354044892
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SOMMERS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16129 E 111TH ST N
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A1DE7609DAD024980892
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1961 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOPALA, KRYSZYNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 SAN FERNANDO DR.
 City HIGH POINT State NC Zip Code 27265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A1E10E3AB37094208890
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SORENSON, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6440 WASATCH BLVD
 City SALT LAKE CITY State UT Zip Code 84121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A21F3D71195E7402FBDB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SOSA, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16216 SW 79TH TER
 City MIAMI State FL Zip Code 33193
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A0DB73D4B22524128990
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1962 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOSEBEE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9050 WALNUT COVE LN
 City GAINESVILLE State GA Zip Code 30506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKSHIRE HATHAWAY Occupation (for Individual) RE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ADD1596730A214928A49
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SOSIEWICZ, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 GEORGI CIR
 City MILFORD State PA Zip Code 18337-7635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A511C9AC53E524360B0C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SOSIEWICZ, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 GEORGI CIR
 City MILFORD State PA Zip Code 18337-7635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A1550854471D64BE0B7B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1963 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOTOMAYOR, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1211 CIN-D LANE

City SOMERSET	State PA	Zip Code 15501
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2021

Transaction ID : AF261EB4F37D244919FE

Amount of Each Receipt this Period
50.00

Memo Item

B. SOTOMAYOR, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1211 CIN-D LANE

City SOMERSET	State PA	Zip Code 15501
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2021

Transaction ID : A2F3080EF65B84EA78BC

Amount of Each Receipt this Period
50.00

Memo Item

C. SOUTHARD, DIANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1346 HICKORY RIDGE LANE

City COLUMBUS	State OH	Zip Code 43235
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2021

Transaction ID : A127E96C95D014483BA0

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1964 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOUTHARD, DIANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1346 HICKORY RIDGE LANE

City COLUMBUS	State OH	Zip Code 43235
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2021

Transaction ID : A1C408215C7B24AD8950

Amount of Each Receipt this Period
50.00

Memo Item

B. SPACK, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 26568

City SCOTTSDALE	State AZ	Zip Code 85255
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2021

Transaction ID : A9CD8F0AC3CCC442EBA7

Amount of Each Receipt this Period
35.00

Memo Item

C. SPARKS, CANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3050 CANYON VIEW COURT

City WALLA WALLA	State WA	Zip Code 99362
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) WRITER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2021

Transaction ID : A3CD3BFA2765E43A297C

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1965 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPARKS, CANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3050 CANYON VIEW COURT
 City WALLA WALLA State WA Zip Code 99362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2021
Transaction ID : A9EC722E7D9A84451886
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SPEECE, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 CLARK ST
 City BOWLING GREEN State OH Zip Code 43402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : AD4820F8430584469A41
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SPEECE, MELVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 CLARK ST
 City BOWLING GREEN State OH Zip Code 43402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : AA68C1BADA42E43B38FF
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1966 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPEEGLE, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 MAROON BELL ROAD
 City CHINO HILLS State CA Zip Code 91709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A05CCB955560B40529A9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SPEIGHT, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6353 LORRAINE RD
 City BAILEY State NC Zip Code 27807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A402F44711CA14635A0D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD
 City WALLKILL State NY Zip Code 12589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 08 / 2021
Transaction ID : ABCFAE37E3CF44B00BCA
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1967 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD
 City WALLKILL State NY Zip Code 12589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 04 / 2021
Transaction ID : AB1504227D1DF4E9DA81
 Amount of Each Receipt this Period 15.00
 Memo Item

B. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD
 City WALLKILL State NY Zip Code 12589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 04 / 05 / 2021
Transaction ID : AB2179E8577314848983
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD
 City WALLKILL State NY Zip Code 12589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A0AF38224AFF44AB8A3B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1968 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD

City WALLKILL	State NY	Zip Code 12589
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : A9672399AC9F0494EA7E

Amount of Each Receipt this Period
15.00

Memo Item

B. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD

City WALLKILL	State NY	Zip Code 12589
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : ADE91361C418246418FD

Amount of Each Receipt this Period
25.00

Memo Item

C. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD

City WALLKILL	State NY	Zip Code 12589
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : AA5298DE5F1E04219844

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1969 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD
 City WALLKILL State NY Zip Code 12589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AAF7CBFAA25A146AB8F9
 Amount of Each Receipt this Period 15.00
 Memo Item

B. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD
 City WALLKILL State NY Zip Code 12589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A2A03AC15462A4342BF0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SPIGNARDO, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 PROSPECT HILL ROAD
 City WALLKILL State NY Zip Code 12589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A7D9F96DAFB7D44E7889
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1970 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPLIDSBOEL, JAMES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3130 NE ALAMEDA TERRACE

City PORTLAND	State OR	Zip Code 97212
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A6B381026AF4543E3BD8

Amount of Each Receipt this Period
50.00

Memo Item

B. SPLIDSBOEL, JAMES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3130 NE ALAMEDA TERRACE

City PORTLAND	State OR	Zip Code 97212
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A3DBC556156A14D77A0D

Amount of Each Receipt this Period
50.00

Memo Item

C. SPOELSTRA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10465 FISH RD

City BELDING	State MI	Zip Code 48809
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AB892C43A7A504142A0A

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1971 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPOELSTRA, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10465 FISH RD
 City BELDING State MI Zip Code 48809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : ADAF1C06B4518400586C
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SPOSATO, MOLLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 LORETTA AVE
 City JAMESTOWN State NY Zip Code 14701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JAMESTOWN YMCA Occupation (for Individual) RECEPTIONIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A9ECE32CF15AB474DA3E
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. SPRAGUE, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 BREA CANYON RD
 City WALNUT State CA Zip Code 91789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KOOK Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : A568B8C232BBE43ACB87
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1972 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPRAGUE, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 318 BREA CANYON RD
 City WALNUT State CA Zip Code 91789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KOOK Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A6AC39705A3A54BF7BE7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SPRATT, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 584 VINTAGE POONTE
 City AVON LAKE State OH Zip Code 44012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AC1F9864C5EF442C7BA2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SPRINGER, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 APRIL COVE
 City MONTGOMERY State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 06 / 2021
Transaction ID : A3685A8DEFF47443BABF
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 1973 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STABE, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11963 MANDOLIN WAY
 City RANCHO CORDOVA State CA Zip Code 95742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A5707391884294C4FA43
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. STABE, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11963 MANDOLIN WAY
 City RANCHO CORDOVA State CA Zip Code 95742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : ADFC09FF2FE8541BFABE
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : AD4B417DBE8924B64814
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1974 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : A54770E7F1D6041FB97F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A0143C6A8FB884868AE5
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A1572F07E305B44A6B3C
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 1975 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : AA54447A9F50D4403BB9
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : ABC40DFA46F5F4CDE810
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A6454E2CC416947D283A
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1976 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STADLER, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 WALNUT DRIVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A92289AF8DBA94FB8831
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STAFFORD, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3037 KINGFISHER PT
 City CHULUOTA State FL Zip Code 32766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAFFOWAY Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A48681D42AA744520A52
 Amount of Each Receipt this Period 100.00
 Memo Item

C. STAFFORD, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3037 KINGFISHER PT
 City CHULUOTA State FL Zip Code 32766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAFFOWAY Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A584B85FE3FCD4433A43
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1977 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STAFFORD, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3037 KINGFISHER PT
 City CHULUOTA State FL Zip Code 32766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STAFFOWAY Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A9A112839C8034F748DC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. STALEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 CASTEC DRIVE
 City SACRAMENTO State CA Zip Code 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2021
Transaction ID : A1BB848C802814E18A5F
 Amount of Each Receipt this Period 250.00
 Memo Item

C. STALEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 CASTEC DRIVE
 City SACRAMENTO State CA Zip Code 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2021
Transaction ID : AD412F3C77EBA46F7A4A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1978 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STALEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 CASTEC DRIVE
 City SACRAMENTO State CA Zip Code 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : A7BAE95B0F23B4E6FB13
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. STALEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 CASTEC DRIVE
 City SACRAMENTO State CA Zip Code 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : AA800A300FB6A4968B71
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. STALEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 CASTEC DRIVE
 City SACRAMENTO State CA Zip Code 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A62818E6362FD404B850
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1979 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STALEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1621 CASTEC DRIVE
 City SACRAMENTO State CA Zip Code 95864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A596F428536CE4F66A07
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. STAM, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9393 N 90 ST, STE 102-237
 City SCOTTSDALE State AZ Zip Code 85258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A4910E73710634FBFBCEB
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. STANCIL, JAMES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4423 US HWY 117
 City WILSON State NC Zip Code 27893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AA3B359EA0E1143D0971
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1980 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STANDARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 R STREET NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2021
Transaction ID : ACD41444176984A74B00
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STANDARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 R STREET NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 07 / 2021
Transaction ID : AB7CA00B941084C0F8BD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. STANDARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 R STREET NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A296A024484E44A3C891
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1981 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STANDARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 R STREET NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A529862C5423347D9AAE
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. STANDARD, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 R STREET NE
 City WASHINGTON State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : ADCCE8342205D4AD2A82
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. STANDER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1722 SW 22 PARK
 City TOPEKA State KS Zip Code 66611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : A34C805C519844ED8A20
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1982 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STANFORD, PRISCILLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 N 18TH ST
 City IMMOKALEE State FL Zip Code 34142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : A3D03B4539F254347BFE
 Amount of Each Receipt this Period 35.00
 Memo Item

B. STANFORD, QUINTEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9676 CR 429
 City MERKEL State TX Zip Code 79536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 21 / 2021
Transaction ID : AC6C8FF227FAB48F4820
 Amount of Each Receipt this Period 250.00
 Memo Item

C. STANFORD, QUINTEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9676 CR 429
 City MERKEL State TX Zip Code 79536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AA9018293166A4CA0A09
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1983 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STANGO, SUSAN, SOSAMMA, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94 CEDAR ST
 City CEDAR GROVE State NJ Zip Code 07009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED (CARE MANAGEMENT 2000INC Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : A96100E3134044331AEE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STAPLETON, MIRNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14125N100E
 City EDINBURGH State IN Zip Code 46124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : A216F8E5E74ED41039CA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. STARNES, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1739 WESTLAND DR SW
 City CLEVELAND State TN Zip Code 37311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : A83BAEC77263A4E9DB5C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1984 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STEPHENS, DONALD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9184 W 1300 N

City ELWOOD	State IN	Zip Code 46036
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 03 / 12 / 2021
Transaction ID : ADD526325231A4B1C810

Amount of Each Receipt this Period
 100.00

Memo Item

B. STEPHENS, DONALD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9184 W 1300 N

City ELWOOD	State IN	Zip Code 46036
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 12 / 2021
Transaction ID : A18A8D9DD64A54950B3D

Amount of Each Receipt this Period
 100.00

Memo Item

C. STEPHENS, DONALD, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9184 W 1300 N

City ELWOOD	State IN	Zip Code 46036
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 12 / 2021
Transaction ID : ABDCCC7C97D884A06A1E

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1985 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STEPHENS, DONALD, D., ,

Mailing Address 9184 W 1300 N

City ELWOOD State IN Zip Code 46036

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
06 / 12 / 2021
Transaction ID : AAE1FB1605D22430C828

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STEPHENSON, JANET, , ,

Mailing Address 16025 GRIFFITH AVE.

City WASCO State CA Zip Code 93280

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 01 / 2021
Transaction ID : A3CF7A8A5B3964BD4A16

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STEPHENSON, JANET, , ,

Mailing Address 16025 GRIFFITH AVE.

City WASCO State CA Zip Code 93280

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 01 / 2021
Transaction ID : A2CA0D505D5354CA9BD7

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1986 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STEPHENSON, KITTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16007 HUMMEL COURT
 City FRANKLIN State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AF11E904126EB4A59BD7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. STEPHENSON, ROSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4305 WENDELL
 City BELLAIRE State TX Zip Code 77401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A26525A601749449D91F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. STEPP, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 917 S. COUNTRY WAY
 City WASHINGTON State UT Zip Code 84780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDLORD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2021
Transaction ID : AEDFB2DC70E154818BC2
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1987 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STEPP, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 917 S. COUNTRY WAY
 City WASHINGTON State UT Zip Code 84780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDLORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 13 / 2021**
Transaction ID : A472635E6AB254220AF7
 Amount of Each Receipt this Period 100.00
 Memo Item

B. STERMON, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 WEST IDAHO ST.
 City WEISER State ID Zip Code 83672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 06 / 2021**
Transaction ID : A8B19E5E7057940939DB
 Amount of Each Receipt this Period 100.00
 Memo Item

C. STERMON, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 WEST IDAHO ST.
 City WEISER State ID Zip Code 83672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 06 / 2021**
Transaction ID : A2713B3A0CF5F49F5ADD
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1988 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STERMON, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 WEST IDAHO ST.
 City WEISER State ID Zip Code 83672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A6DB390289E4948739F6
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. STERMON, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 125 WEST IDAHO ST.
 City WEISER State ID Zip Code 83672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2021
Transaction ID : A2EFD2322550C41599E7
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. STEVENS, B J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MOUNTAIN COVE CT
 City HENDERSON State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : A43C2E9CAE5ED4CB2950
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1989 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STEWART, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5400 WATER LILY CT
 City LEESBURG State FL Zip Code 34748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A4FE92B4412FB41E0B4D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. STICKLEY, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11531 HI RIDGE RD
 City LAKESIDE State CA Zip Code 92040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : ADD9EE93A820841C5846
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. STICKLEY, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11531 HI RIDGE RD
 City LAKESIDE State CA Zip Code 92040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : AD218EAB50AC0475FA78
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1990 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STIEGELMEIER, OWEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 MONTICELLO CT
 City VENICE State FL Zip Code 34292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AE5F3EC7FD0FE4D5A806
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. STILP, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2418 THAYER ST
 City EVANSTON State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A847CE261977A487E9B4
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. STIRKINS, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6523 24TH AVE NW BLDG C
 City SEATTLE State WA Zip Code 98117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC WESTERN INSURANCE SERVICES INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A91DF9C306A2F4476A95
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1991 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STITES, NIKKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14523 60TH AVE SE
 City EVERETT State WA Zip Code 98208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME ELECTRIC Occupation (for Individual) FLEET MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : AB234C432B67B4087962
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. STITES, NIKKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14523 60TH AVE SE
 City EVERETT State WA Zip Code 98208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIME ELECTRIC Occupation (for Individual) FLEET MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2021
Transaction ID : A63896EA01F95445AB13
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. STITT, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 TUMBLE BROOK DRIVE
 City LAS VEGAS State NV Zip Code 89134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SPECIAL EVENT PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : A77A46CFD624E40ABB9A
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1992 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STITT, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 TUMBLE BROOK DRIVE
 City LAS VEGAS State NV Zip Code 89134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SPECIAL EVENT PLANNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A9BA48EB4FA3148E2B81
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STOESZ, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2046 STOCKINGER DR
 City SAINT CLOUD State MN Zip Code 56303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A168C2D8B16474DC0AE7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. STOFFEL, JOETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12459 TITHING RIDGE DR.
 City RIVERTON State UT Zip Code 84065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 23 / 2021
Transaction ID : A830A34B242814FD9A3E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1993 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STONE, TOMMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DARBY GLEN
 City SAN ANTONIO State TX Zip Code 78257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021
Transaction ID : A6FCA24D8C223495A827
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. STONE, TOMMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DARBY GLEN
 City SAN ANTONIO State TX Zip Code 78257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : AF645C668A9194FEF886
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. STONE, TOMMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DARBY GLEN
 City SAN ANTONIO State TX Zip Code 78257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A90386A4DD5034132A52
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1994 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STONE, TOMMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 DARBY GLEN
 City SAN ANTONIO State TX Zip Code 78257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A6F498B14CE9F47E997F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. STORKS, NELSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 CATASAUQUA RD 165
 City ALLENTOWN State PA Zip Code 18109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A09C5DF6E02C64222BEB
 Amount of Each Receipt this Period 35.00
 Memo Item

C. STORKS, NELSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 CATASAUQUA RD 165
 City ALLENTOWN State PA Zip Code 18109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AB25E54F65D2A4A01951
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1995 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STORM, GAIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2642
 City LONDON State KY Zip Code 40743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STORM SECURITY, LTD. Occupation (for Individual) BUSINESS MGR.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021
Transaction ID : A1B2F573B584D41E0A91
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STORRO, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8157 E ARROYO SECO RD
 City SCOTTSDALE State AZ Zip Code 85266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : A9B5BDD84855046D6A7E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. STORRO, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8157 E ARROYO SECO RD
 City SCOTTSDALE State AZ Zip Code 85266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A11C96F44558642AEAD6
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1996 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STORRO, JUDY, , ,

Mailing Address **8157 E ARROYO SECO RD**

City SCOTTSDALE	State AZ	Zip Code 85266
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
06 / 26 / 2021

Transaction ID : A049C1CB4778C4F23A74

Amount of Each Receipt this Period
35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STOUT, JOHN, B., MR.,

Mailing Address **PO BOX 1053**

City FREDERIKSTED	State VI	Zip Code 00841
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
02 / 08 / 2021

Transaction ID : AAA4951C067B140CCB8E

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STOUT, JOHN, B., MR.,

Mailing Address **PO BOX 1053**

City FREDERIKSTED	State VI	Zip Code 00841
-----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
02 / 13 / 2021

Transaction ID : AF5E98075239C4A40904

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1997 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STOUT, JOHN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1053

City FREDERIKSTED	State VI	Zip Code 00841
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021

Transaction ID : A8DF0E579D49741AFAA2

Amount of Each Receipt this Period
100.00

Memo Item

B. STOUT, JOHN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1053

City FREDERIKSTED	State VI	Zip Code 00841
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021

Transaction ID : A6DEAB2F3A334440CAA1

Amount of Each Receipt this Period
100.00

Memo Item

C. STOUT, JOHN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1053

City FREDERIKSTED	State VI	Zip Code 00841
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021

Transaction ID : AF2A19A9FAA7040CCB6A

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1998 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STOUT, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1053
 City FREDERIKSTED State VI Zip Code 00841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A5534F5D21440448792D
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. STOUT, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1053
 City FREDERIKSTED State VI Zip Code 00841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A57CBD1DDDB304F319E8
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. STOWE, GIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8436 CATAWBA COVE DR
 City BELMONT State NC Zip Code 28012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : ADE7B12404D20483EA17
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1999 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STRACHAN, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27279 INSPIRATION DR., EAST

City PIONEER	State CA	Zip Code 95666
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : ABF78A70388D24ED189A

Amount of Each Receipt this Period
50.00

Memo Item

B. STRACHAN, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27279 INSPIRATION DR., EAST

City PIONEER	State CA	Zip Code 95666
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : AF8F1A411F00349BCA70

Amount of Each Receipt this Period
50.00

Memo Item

C. STRATMAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 127

City PARKER	State CO	Zip Code 80134
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) REAL ESTATE BROKER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A9F325F9837554E92A4F

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2000 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STRATTON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4971 AUBURN FRD
 City GREENWOOD State IN Zip Code 46142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : ACE42F95B6F654473B94
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. STRICKLAND, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30718 IMPERIAL ST
 City SHAFTER State CA Zip Code 93263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A753A47AF427941D98D4
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. STRICKLAND, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30718 IMPERIAL ST
 City SHAFTER State CA Zip Code 93263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A3999453E4EC94E849BA
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2001 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STROMEI, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 69
 City LOS LUNAS State NM Zip Code 87031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2021
Transaction ID : AA94F8D57C62A41E19D2
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STRUIKSMA, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18360 SUMMER AVE
 City ARTESIA State CA Zip Code 90701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WC MANAGEMENT Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 26 / 2021
Transaction ID : A9D1874E7EF904299ACA
 Amount of Each Receipt this Period 250.00
 Memo Item

C. STRUIKSMA, MARVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18360 SUMMER AVE
 City ARTESIA State CA Zip Code 90701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WC MANAGEMENT Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 26 / 2021
Transaction ID : AA1A5EF3C52DB4FE8950
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2002 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STUARD, QINGLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3506 NORWOOD CIR
 City RICHARDSON State TX Zip Code 75082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : AA747755E67544D84890
 Amount of Each Receipt this Period 35.00
 Memo Item

B. STUART, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ELAINE AVENUE
 City EATON State OH Zip Code 45320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIBERTY UNIVERSITY Occupation (for Individual) STUDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A7A45A008A8EA4061BAE
 Amount of Each Receipt this Period 35.00
 Memo Item

C. STUBER, RUSS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 PARK PLACE
 City GRAND ISLAND State NY Zip Code 14072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A79E7F2519E844785A5C
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2003 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STUEWE, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 WACONIA PKWY S
 City WACONIA State MN Zip Code 55387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PRIVATE HOUSEKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A2C87FCF1036B4EFA8E3
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STUEWE, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 WACONIA PKWY S
 City WACONIA State MN Zip Code 55387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PRIVATE HOUSEKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AAB1771EC98DA485B8AD
 Amount of Each Receipt this Period 50.00
 Memo Item

C. STUMP, JANE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3204 CARLISLE ROAD
 City BIRMINGHAM State AL Zip Code 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2021
Transaction ID : AF230B3AC1E284AAD8A0
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2004 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STUMP, JANE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3204 CARLISLE ROAD
 City BIRMINGHAM State AL Zip Code 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AC38AD52DBFC645E49FA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STURCKEN, BENI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 BEALE CT.DR.
 City BLAIRSVILLE State GA Zip Code 30512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AE08A73C7A5B543C2A1A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. STUTTS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24971 PARSONS MILL DR.
 City PORTER State TX Zip Code 77365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCED STEEL SOLUTIONS INC. Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : AD4E8ECD9939B4135ACE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2005 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STYER, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 EAST INWOOD DRIVE

City HUNTINGTON	State WV	Zip Code 25701
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2021

Transaction ID : A5E8247BE156C4875A07

Amount of Each Receipt this Period
25.00

Memo Item

B. STYER, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 EAST INWOOD DRIVE

City HUNTINGTON	State WV	Zip Code 25701
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021

Transaction ID : A7250F44911E84F4EB15

Amount of Each Receipt this Period
25.00

Memo Item

C. STYER, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 EAST INWOOD DRIVE

City HUNTINGTON	State WV	Zip Code 25701
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2021

Transaction ID : A21CF2D6D23D04137A82

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2006 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STYER, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 EAST INWOOD DRIVE
 City HUNTINGTON State WV Zip Code 25701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A1FFD090D4756425F877
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. SUEZ, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002 LOCH LOMOND DRIVE
 City ARLINGTON State TX Zip Code 76012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2021
Transaction ID : A162BE793B4E04D5EB07
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SUEZ, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1002 LOCH LOMOND DRIVE
 City ARLINGTON State TX Zip Code 76012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2021
Transaction ID : AEFEF2D32B3DA4DB7AE9
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2007 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2021

Transaction ID : A818F9578B92E436AAB4

Amount of Each Receipt this Period
100.00

Memo Item

B. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2021

Transaction ID : AA81E7B33048740A7A9B

Amount of Each Receipt this Period
100.00

Memo Item

C. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2021

Transaction ID : A38A5502DC68740BE9C6

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2008 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2021

Transaction ID : A02075EA419384D348A1

Amount of Each Receipt this Period
100.00

Memo Item

B. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : A40A88DFCC06E45EABD1

Amount of Each Receipt this Period
100.00

Memo Item

C. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : A7C8122AFEC8F4D6A9C2

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2009 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2021

Transaction ID : A2FEEA6DC0D0646CAB8/

Amount of Each Receipt this Period
100.00

Memo Item

B. SUEZ, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 LOCH LOMOND DRIVE

City ARLINGTON	State TX	Zip Code 76012
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : A7A6BAF9341CE47EC8A2

Amount of Each Receipt this Period
100.00

Memo Item

C. SUGDEN, HERBERT, J, , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17800 SE 237TH CT

City UMATILLA	State FL	Zip Code 32784
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2021

Transaction ID : A4AAF3263339E467F89A

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2010 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUGDEN, HERBERT, J, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17800 SE 237TH CT
 City UMATILLA State FL Zip Code 32784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 07 / 2021**
Transaction ID : AAFF3759C26224AA88DB
 Amount of Each Receipt this Period 250.00
 Memo Item

B. SUGDEN, HERBERT, J, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17800 SE 237TH CT
 City UMATILLA State FL Zip Code 32784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **05 / 07 / 2021**
Transaction ID : A3133A140D4344BB0A1A
 Amount of Each Receipt this Period 250.00
 Memo Item

C. SULEJMANI, FEJZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4004 DENICE COURT
 City GLENVIEW State IL Zip Code 60025-2431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FMA PROPERTIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A882E4B9ABBC04F9EAE9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2011 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SULLIVAN, LUCAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7102 GRANT DR
 City MAGNOLIA State TX Zip Code 77354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOODFOREST GOLF CLUB Occupation (for Individual) BARTENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A64C63FD28F344DC0839
 Amount of Each Receipt this Period 5.00
 Memo Item

B. SULLIVAN, LUCAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7102 GRANT DR
 City MAGNOLIA State TX Zip Code 77354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WOODFOREST GOLF CLUB Occupation (for Individual) BARTENDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A6F08AF390F1B432BA6B
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SULLIVAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1428 AMADOR LN P.O. BOX 720939
 City PINON HILLS State CA Zip Code 92372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A0A176FE339684BBE8E4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2012 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SULLIVAN, NANCY, , ,

Mailing Address 3003 GULFSHORE BLVD N

City NAPLES State FL Zip Code 34103

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2021

Transaction ID : ACE3283B71BF54C0F826

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SULLIVAN, NANCY, , ,

Mailing Address 3003 GULFSHORE BLVD N

City NAPLES State FL Zip Code 34103

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2021

Transaction ID : A7306C56BA140478995C

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SULLIVAN, TIMOTHY, , ,

Mailing Address 13741 S INDIAN SPRINGS RD

City BUCHANAN State MI Zip Code 49107

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SAINT JOSEPH REGIONAL MEDICAL CENTER Occupation (for Individual) RN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2021

Transaction ID : A7D4CD9ACE9A949048C8

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2013 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUMMA, DOMINICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 WEST FERN AVE
 City FOLEY State AL Zip Code 36535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 24 / 2021**
Transaction ID : AF0C542E413054A20B28
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SUMMERS, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 COOPERS CREEK RD
 City BRYSON CITY State NC Zip Code 28713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A24591BFA8C594A8F90A
 Amount of Each Receipt this Period 15.00
 Memo Item

C. SUMMERS, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 COOPERS CREEK RD
 City BRYSON CITY State NC Zip Code 28713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 29 / 2021**
Transaction ID : ADF45E8142B514A9AB8F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2014 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUMMERS, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 COOPERS CREEK RD
 City BRYSON CITY State NC Zip Code 28713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AC32917AF5A6446AFB65
 Amount of Each Receipt this Period 15.00
 Memo Item

B. SUMMERS, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2533 COOPERS CREEK RD
 City BRYSON CITY State NC Zip Code 28713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AB54CA06B4E904995900
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SUMMERS, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 101
 City BLOOMSBURY State NJ Zip Code 08804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 28 / 2021
Transaction ID : AEA124E4AFF6D4B02879
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2015 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SURI, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 996 STANTON AVE.
 City BALDWIN State NY Zip Code 11510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAIMONIDES MEDICAL CENTER Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 17 / 2021**
Transaction ID : A3D3361CBBA1C494E883
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SURI, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 996 STANTON AVE.
 City BALDWIN State NY Zip Code 11510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAIMONIDES MEDICAL CENTER Occupation (for Individual) RN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : A03CBC70827A2498FA94
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SUSA, ALICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 VIRGINIA ST
 City LATROBE State PA Zip Code 15650-3826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : ADBA372B5EF1D4BA6802
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2016 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUTLIFF, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 CREEK RD
 City CAMP HILL State PA Zip Code 17011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021
Transaction ID : A698F5BFE715E459C91A
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. SUTLIFF, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 CREEK RD
 City CAMP HILL State PA Zip Code 17011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A2A1147AF40BB470ABD4
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SUTLIFF, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 CREEK RD
 City CAMP HILL State PA Zip Code 17011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : A47953E4DC8164144902
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2017 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUTORIUS, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 50618

City HENDERSON	State NV	Zip Code 89016
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2021

Transaction ID : A272EB2C3541542F6A65

Amount of Each Receipt this Period
100.00

Memo Item

B. SUTORIUS, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 50618

City HENDERSON	State NV	Zip Code 89016
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2021

Transaction ID : AC5DCB634C8F84237AFA

Amount of Each Receipt this Period
100.00

Memo Item

C. SUTORIUS, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 50618

City HENDERSON	State NV	Zip Code 89016
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A318B0C8AF77E4E00A02

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2018 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SUTORIUS, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50618
 City HENDERSON State NV Zip Code 89016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 14 / 2021
Transaction ID : AC61FA485BE784D93A95
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SUTTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2926 CISCO DR N
 City LAKE HAVASU CITY State AZ Zip Code 86403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 04 / 01 / 2021
Transaction ID : AE8B8A34FA03C42629BF
 Amount of Each Receipt this Period 1001.00
 Memo Item

C. SWAIM, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 HILLMONT CT
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DXC TECHNOLOGY Occupation (for Individual) IT DELIVERY MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A2F5EF0E2F7BD4B748B8
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1201.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2019 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SWIFT, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2380 TOLTECA COURT
 City SOUTH LAKE TAHOE State CA Zip Code 96150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : ADAEE21E2D71F4306B11
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. SWIFT, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2380 TOLTECA COURT
 City SOUTH LAKE TAHOE State CA Zip Code 96150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : ADD974AE882A14BEDB1D
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2021
Transaction ID : A15D3C487CF75440DAF0
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2020 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 261.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2021
Transaction ID : AEDC50046C10844AB855
 Amount of Each Receipt this Period
 11.25
 Memo Item

B. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2021
Transaction ID : AAB1B9371F77C4249B19
 Amount of Each Receipt this Period
 45.00
 Memo Item

C. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 406.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2021
Transaction ID : A52F3D4B8C47F4F48A5C
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	156.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2021 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 451.25

Date of Receipt **03 / 06 / 2021**
Transaction ID : A0AA5045067844F13995
 Amount of Each Receipt this Period 45.00
 Memo Item

B. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 551.25

Date of Receipt **03 / 10 / 2021**
Transaction ID : A8269A126F4F947F3943
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 596.25

Date of Receipt **04 / 06 / 2021**
Transaction ID : A726CDD9DE811424CACF
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2022 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWITZER, JOANN, , ,

Mailing Address 14035 SE 141 AVE

City CLACKAMAS State OR Zip Code 97015

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
696.25

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2021

Transaction ID : AEF95E37AC0584961B14

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWITZER, JOANN, , ,

Mailing Address 14035 SE 141 AVE

City CLACKAMAS State OR Zip Code 97015

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
741.25

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2021

Transaction ID : A07FF547B80BD48FC844

Amount of Each Receipt this Period
45.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SWITZER, JOANN, , ,

Mailing Address 14035 SE 141 AVE

City CLACKAMAS State OR Zip Code 97015

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
841.25

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 10 / 2021

Transaction ID : AE70B300C7788453BA88

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2023 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SWITZER, JOANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14035 SE 141 AVE
 City CLACKAMAS State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1041.25

Date of Receipt **06 / 26 / 2021**
Transaction ID : AA6F5DA9FAF9A4ECD33
 Amount of Each Receipt this Period 200.00
 Memo Item

B. SWOPE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7048 SAMPLE DRIVE
 City THE COLONY State TX Zip Code 75056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX Occupation (for Individual) OFFICE PROFFESIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 05 / 2021**
Transaction ID : A2B467F1C347D43E1882
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SWOPE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7048 SAMPLE DRIVE
 City THE COLONY State TX Zip Code 75056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX Occupation (for Individual) OFFICE PROFFESIONAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 05 / 2021**
Transaction ID : A8CF4FF54E9F04C7694A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2024 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SYLVESTER, GENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 REAMER STREET
 City HOUSTON State TX Zip Code 77074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : AC49D80AEE2584D9D92B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SYLVESTER, GENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5801 REAMER STREET
 City HOUSTON State TX Zip Code 77074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INTERIOR DESIGN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 25 / 2021**
Transaction ID : AE7181B8570764D81876
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SZABO, MARIANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9700 N. WILLOW AVE
 City TAMPA State FL Zip Code 33612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-FLORIDA PATHOLOGY Occupation (for Individual) PATHOLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt **03 / 15 / 2021**
Transaction ID : A668C9A4966F24DFE931
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2025 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SZABO, MARIANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9700 N. WILLOW AVE
 City TAMPA State FL Zip Code 33612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-FLORIDA PATHOLOGY Occupation (for Individual) PATHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : A95E21E7369F5493F9BA
 Amount of Each Receipt this Period 75.00
 Memo Item

B. SZABO, MARIANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9700 N. WILLOW AVE
 City TAMPA State FL Zip Code 33612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-FLORIDA PATHOLOGY Occupation (for Individual) PATHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : ACA92CBE5E9CE4F9A96B
 Amount of Each Receipt this Period 75.00
 Memo Item

C. SZABO, MARIANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9700 N. WILLOW AVE
 City TAMPA State FL Zip Code 33612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MID-FLORIDA PATHOLOGY Occupation (for Individual) PATHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **06 / 15 / 2021**
Transaction ID : A79F78A255C844CBFACC
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2026 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAFT, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 VALECROFT AVE.
 City WESTLAKE VILLAGE State CA Zip Code 91361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORE THAN WAFFLES Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2021
Transaction ID : AB48F210B6FFA4B44B82
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TAFT, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 VALECROFT AVE.
 City WESTLAKE VILLAGE State CA Zip Code 91361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORE THAN WAFFLES Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A1FB59926CA0D43A0B80
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TAFT, NANCY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21377 CONCORD
 City SOUTHFIELD State MI Zip Code 48076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A080D2845EC3C4A9F91C
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2027 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAFT, NANCY, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21377 CONCORD

City SOUTHFIELD	State MI	Zip Code 48076
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2021

Transaction ID : ADF14D25D82B94394B59

Amount of Each Receipt this Period
100.00

Memo Item

B. TAFT, NANCY, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21377 CONCORD

City SOUTHFIELD	State MI	Zip Code 48076
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2021

Transaction ID : A16D899419FFEE4CAB8FD

Amount of Each Receipt this Period
100.00

Memo Item

C. TAFT, NANCY, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21377 CONCORD

City SOUTHFIELD	State MI	Zip Code 48076
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : A80A07C65FDCB4946907

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2028 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAFT, NANCY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21377 CONCORD
 City SOUTHFIELD State MI Zip Code 48076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2021
Transaction ID : A5FFE54C108184F51BEC
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. TALIAFERRO, SHELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2787 BARNSLEY LOOP
 City MADISONVILLE State KY Zip Code 42431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPKINS COUNTY BOARD OF EDUCATION Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021
Transaction ID : A936A5784FB9D4401AA3
 Amount of Each Receipt this Period
 20.20
 Memo Item

C. TALIAFERRO, SHELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2787 BARNSLEY LOOP
 City MADISONVILLE State KY Zip Code 42431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPKINS COUNTY BOARD OF EDUCATION Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 229.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AA5FF4C3EF66F4348820
 Amount of Each Receipt this Period
 18.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	88.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2029 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAMAYO, RAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2293 SOARING EAGLE PLACE
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMAYO PROPERTIES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 20 / 2021
Transaction ID : A2CD0257A21FA40C2ADD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TAMAYO, RAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2293 SOARING EAGLE PLACE
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMAYO PROPERTIES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A2A709AEE278540AB8E8
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TAMAYO, RAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2293 SOARING EAGLE PLACE
 City LAKE MARY State FL Zip Code 32746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAMAYO PROPERTIES Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 20 / 2021
Transaction ID : A80469201C33C438BAC2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2030 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TANGEN, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17710 N E 34 AVE
 City RIDGEFIELD State WA Zip Code 98642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 911 DRIVING SCHOOL Occupation (for Individual) DRIVING INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A3792365E67AC482CB5F
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. TANGEN, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17710 N E 34 AVE
 City RIDGEFIELD State WA Zip Code 98642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 911 DRIVING SCHOOL Occupation (for Individual) DRIVING INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A2AAA4F650FE848F6A59
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. TANKOOS, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 EAST 86TH STREET
 City NEW YORK State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2021
Transaction ID : A7DB3A52D322641B0AF2
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2031 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TANKOOS, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 EAST 86TH STREET
 City NEW YORK State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : ABEC6291F300F4637819
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. TANNER, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8089 MADISON AVENUE
 City CITRUS HEIGHTS State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021
Transaction ID : A9180F1BB6C714E8AA76
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TANNER, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8089 MADISON AVENUE
 City CITRUS HEIGHTS State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021
Transaction ID : A914EA658EE5743009EB
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2032 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TANNER, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8089 MADISON AVENUE
 City CITRUS HEIGHTS State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021
Transaction ID : AB2AA95540A7045AE981
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TANNER, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8089 MADISON AVENUE
 City CITRUS HEIGHTS State CA Zip Code 95610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : A621A2565C47C42B6A46
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TATARINOFF, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 ROGERS ST
 City WEST SACRAMENTO State CA Zip Code 95605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A9548BD2FA1B9431FA17
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2033 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TATARINOFF, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 ROGERS ST
 City WEST SACRAMENTO State CA Zip Code 95605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A4D07312B8BDC4B54A3F
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. TATARINOFF, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 ROGERS ST
 City WEST SACRAMENTO State CA Zip Code 95605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : AF4ADDCB329DD41C9864
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. TATARINOFF, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 ROGERS ST
 City WEST SACRAMENTO State CA Zip Code 95605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : A80C23A4A5FB34C38B45
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2034 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TATUM, JODI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 SPRING ST.
 City YORKVILLE State IL Zip Code 60560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : ABA452E3023DD4802B84
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TAYLOR, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13403 TORREY PINES DR.
 City AUBURN State CA Zip Code 95602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A228C0BAB9588495AB89
 Amount of Each Receipt this Period 35.00
 Memo Item

C. TAYLOR, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5507 WATTSBURG RD
 City ERIE State PA Zip Code 16509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 14 / 2021
Transaction ID : AB2ACD6FDC3E847D48F3
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2035 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, JEREMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4477 TAYLOR AVENUE

City OGDEN	State UT	Zip Code 84403
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	02	/	2021

Transaction ID : ADECC605880764E8E95F

Amount of Each Receipt this Period
250.00

Memo Item

B. TAYLOR, JEREMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4477 TAYLOR AVENUE

City OGDEN	State UT	Zip Code 84403
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2021

Transaction ID : A6B686518FE3348B393A

Amount of Each Receipt this Period
250.00

Memo Item

C. TAYLOR, JEREMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4477 TAYLOR AVENUE

City OGDEN	State UT	Zip Code 84403
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2021

Transaction ID : AFFADC35D2E2E49368D4

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2036 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, JEREMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4477 TAYLOR AVENUE
 City OGDEN State UT Zip Code 84403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : A4231297D54084B38B5A
 Amount of Each Receipt this Period 250.00
 Memo Item

B. TAYLOR, JEREMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4477 TAYLOR AVENUE
 City OGDEN State UT Zip Code 84403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **05 / 02 / 2021**
Transaction ID : A691F8A0BC6744CB09F1
 Amount of Each Receipt this Period 250.00
 Memo Item

C. TAYLOR, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 572 S 9TH ST 9
 City SAN JOSE State CA Zip Code 95112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) I S I Occupation (for Individual) INSULATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **03 / 25 / 2021**
Transaction ID : A1ABB14379F34461994E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2037 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TAYLOR, JESSE, , ,

Mailing Address 572 S 9TH ST
9

City SAN JOSE	State CA	Zip Code 95112
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) I S I	Occupation (for Individual) INSULATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A1041915D530240A795B

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TAYLOR, JESSE, , ,

Mailing Address 572 S 9TH ST
9

City SAN JOSE	State CA	Zip Code 95112
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) I S I	Occupation (for Individual) INSULATOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : A4A32560F14D0464CABA

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TAYLOR, JESSE, , ,

Mailing Address 572 S 9TH ST
9

City SAN JOSE	State CA	Zip Code 95112
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) I S I	Occupation (for Individual) INSULATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : AB2EE9FDEA7DF40ABBC!

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="105.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 2038 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 572 S 9TH ST
 9
 City SAN JOSE State CA Zip Code 95112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISI Occupation (for Individual) INSULATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A45BC56A18E01480C9B1
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. TAYLOR, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 572 S 9TH ST
 9
 City SAN JOSE State CA Zip Code 95112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISI Occupation (for Individual) INSULATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A01DBB34DB8124CC7AAA
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. TAYLOR, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 572 S 9TH ST
 9
 City SAN JOSE State CA Zip Code 95112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISI Occupation (for Individual) INSULATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : AA55659DD87DB4050969
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2039 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TAYLOR, KATHRYN, , ,

Mailing Address 478 PARK DR

City TWIN FALLS	State ID	Zip Code 83301
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2021

Transaction ID : A6A40E4B95A2241FFBA8

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TAYLOR, KATHRYN, , ,

Mailing Address 478 PARK DR

City TWIN FALLS	State ID	Zip Code 83301
--------------------	----------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2021

Transaction ID : A2816B56A53C24911977

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TAYLOR, KATHRYN, , ,

Mailing Address 478 PARK DR

City TWIN FALLS	State ID	Zip Code 83301
--------------------	----------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2021

Transaction ID : AA0E4406F6BA340DC92F

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2040 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 478 PARK DR
 City TWIN FALLS State ID Zip Code 83301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 05 / 09 / 2021
Transaction ID : ACDD4D7A4FB9D4A8499C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TAYLOR, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 478 PARK DR
 City TWIN FALLS State ID Zip Code 83301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 22 / 2021
Transaction ID : ABA43127EE62A4996ABA
 Amount of Each Receipt this Period 35.00
 Memo Item

C. TAYLOR, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 478 PARK DR
 City TWIN FALLS State ID Zip Code 83301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 06 / 09 / 2021
Transaction ID : AD39A9326C58A42018C2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2041 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, KATHRYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 478 PARK DR
 City TWIN FALLS State ID Zip Code 83301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AFC4EA5625F3E44D88A1
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TAYLOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1305
 City GRANTS State NM Zip Code 87020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2021
Transaction ID : AAFF6527965C342F08CE
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TAYLOR, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1305
 City GRANTS State NM Zip Code 87020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A7FC8113D0E7B4DEC878
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2042 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 NANCY JEAN RD
 City GREENSBORO State NC Zip Code 27406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A76D40AC8324E4642872
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TAYLOR, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 NANCY JEAN RD
 City GREENSBORO State NC Zip Code 27406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : A597ACDAB401C40979F1
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TAYLOR, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 NANCY JEAN RD
 City GREENSBORO State NC Zip Code 27406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021
Transaction ID : AD9D7E72DE8D5402EBD4
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2043 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 NANCY JEAN RD
 City GREENSBORO State NC Zip Code 27406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A09AA284D578F4CEE90F
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TAYLOR, ROBERT, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 N WARBLER BEND CIRCLE
 City SPRING State TX Zip Code 77382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A2AB30E624C364553B50
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. TAYLOR, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 APPLER COURT
 City LITTLESTOWN State PA Zip Code 17340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A445307D08D394F1AA13
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2044 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TAYLOR, SHEILA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 APPLER COURT

City LITTLESTOWN	State PA	Zip Code 17340
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2021

Transaction ID : A7E96950FE694431DB0F

Amount of Each Receipt this Period
50.00

Memo Item

B. TAYLOR, TERESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 543 AUWINA ST

City KAILUA	State HI	Zip Code 96734
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2021

Transaction ID : AD6A1657616474A1A95F

Amount of Each Receipt this Period
35.00

Memo Item

C. TEAGUE, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 WALLACE LANE

City VICTORIA	State TX	Zip Code 77904
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTH TEXAS ELECTRIC COOP	Occupation (for Individual) SENIOR OPERATOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : A332706DF6BB0464B997

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2045 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TEIXEIRA, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 RYE STREET
 City WINDSOR State CT Zip Code 06016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FEDEX EXPRESS Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A9621E9D923E74FD2AAF
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TERRY, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 MONTERO
 City BURLINGAME State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2021
Transaction ID : A781F9FE574EA41398AC
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TERRY, LES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1316 MONTERO
 City BURLINGAME State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 26 / 2021
Transaction ID : AC4B910E708EF430E8D9
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2046 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TERRY, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1316 MONTERO

City BURLINGAME	State CA	Zip Code 94010
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : A6B1E0D47B1C440A995A

Amount of Each Receipt this Period
100.00

Memo Item

B. TERRY, LES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1316 MONTERO

City BURLINGAME	State CA	Zip Code 94010
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2021

Transaction ID : ACD0B6F0E5C774DD49D2

Amount of Each Receipt this Period
100.00

Memo Item

C. TEWS, DELART, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O.BOX 6847

City JEFFERSON CITY	State MO	Zip Code 65102
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : A51990FC4D5AB4C358BC

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2047 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THAXTON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 782 RENEE STREET
 City SEGUIN State TX Zip Code 78155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2021
Transaction ID : A6428165EBAA84002B1C
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. THAXTON, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 782 RENEE STREET
 City SEGUIN State TX Zip Code 78155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : ADF85F2724AAC4D73B39
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. THIELE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 762 HEYWOOD AVE.
 City EUGENE State OR Zip Code 97404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : ADEE78C86E44C483CBD8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2048 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMAS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POBOX 396, 1317 N JEFFERSON ST

City MONTEZUMA	State IN	Zip Code 47862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2021

Transaction ID : A4F6B25DDC10A46EFBD8

Amount of Each Receipt this Period
25.00

Memo Item

B. THOMAS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POBOX 396, 1317 N JEFFERSON ST

City MONTEZUMA	State IN	Zip Code 47862
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : A4624102EB399488E9FE

Amount of Each Receipt this Period
25.00

Memo Item

C. THOMAS, JAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1527 WINDMILL

City MESQUITE	State TX	Zip Code 75149
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CBRE	Occupation (for Individual) IT SUPPORT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2021

Transaction ID : A88042132BFCC4059B88

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2049 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMAS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1527 WINDMILL
 City MESQUITE State TX Zip Code 75149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CBRE Occupation (for Individual) IT SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A1854F72DE3D44A0486D
 Amount of Each Receipt this Period 5.00
 Memo Item

B. THOMAS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10207 PINE GLEN CIR
 City LOUISVILLE State KY Zip Code 40291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.60

Date of Receipt 03 / 13 / 2021
Transaction ID : A9133D424F1E0406CA89
 Amount of Each Receipt this Period 20.20
 Memo Item

C. THOMAS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10207 PINE GLEN CIR
 City LOUISVILLE State KY Zip Code 40291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.60

Date of Receipt 03 / 18 / 2021
Transaction ID : A98DE6DD450DB41C8A86
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2050 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, JANET, , ,

Mailing Address 10207 PINE GLEN CIR

City LOUISVILLE	State KY	Zip Code 40291
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2021

Transaction ID : A74F8952D3411427389C

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, JANET, , ,

Mailing Address 10207 PINE GLEN CIR

City LOUISVILLE	State KY	Zip Code 40291
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2021

Transaction ID : A9193F024020C4634BF7

Amount of Each Receipt this Period
20.20

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, JANET, , ,

Mailing Address 10207 PINE GLEN CIR

City LOUISVILLE	State KY	Zip Code 40291
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2021

Transaction ID : A11C935D19C074067813

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2051 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMAS, JANET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10207 PINE GLEN CIR
 City LOUISVILLE State KY Zip Code 40291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.80

Date of Receipt 05 / 02 / 2021
Transaction ID : AB21FA0FCE41F4C13950
 Amount of Each Receipt this Period 35.00
 Memo Item

B. THOMAS, MARYJEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 CASTLE CREEK DR
 City WAYNESVILLE State NC Zip Code 28786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 29 / 2021
Transaction ID : ADE26C86C9C0E477CB57
 Amount of Each Receipt this Period 450.00
 Memo Item

C. THOMAS, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 W CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A6F92F7900ECF4DFDBA1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2052 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMAS, TANYA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 821 W CALVADA BLVD
 City PAHRUMP State NV Zip Code 89048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 25 / 2021
Transaction ID : A3D90771F9F704688833
 Amount of Each Receipt this Period 50.00
 Memo Item

B. THOMPSON, BARBARA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18117 US HWY 69
 City LINDALE State TX Zip Code 75771-6005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A2FB421061F304206ADF
 Amount of Each Receipt this Period 35.00
 Memo Item

C. THOMPSON, ELBA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 NW 78TH AVENUE
 City HOLLYWOOD State FL Zip Code 33024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2021
Transaction ID : AED57C2839B3B43DBA10
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2053 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, ELBA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 NW 78TH AVENUE

City HOLLYWOOD	State FL	Zip Code 33024
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2021

Transaction ID : AFEE60D36816E42DB83C

Amount of Each Receipt this Period
15.00

Memo Item

B. THOMPSON, ELBA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 NW 78TH AVENUE

City HOLLYWOOD	State FL	Zip Code 33024
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021

Transaction ID : AD64C90E171FC4F2DA1F

Amount of Each Receipt this Period
50.00

Memo Item

C. THOMPSON, ELBA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 NW 78TH AVENUE

City HOLLYWOOD	State FL	Zip Code 33024
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021

Transaction ID : AFA8BCB2854A1423481F

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2054 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, ELBA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 NW 78TH AVENUE
 City HOLLYWOOD State FL Zip Code 33024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A138CAFEA7A6248EDA00
 Amount of Each Receipt this Period 50.00
 Memo Item

B. THOMPSON, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 BURTON HILL ROAD
 City WESTWORTH VILLAGE State TX Zip Code 76114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 25 / 2021
Transaction ID : A9DE5BF5CA5874562812
 Amount of Each Receipt this Period 250.00
 Memo Item

C. THOMPSON, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 BURTON HILL ROAD
 City WESTWORTH VILLAGE State TX Zip Code 76114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 25 / 2021
Transaction ID : A93CE6CE5DB964E768C4
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2055 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 N THOMPSON ST
 City MELVIN State IL Zip Code 60952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A0E1B736383AD4A7A9C3
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. THOMPSON, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 216 N THOMPSON ST
 City MELVIN State IL Zip Code 60952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A1DC960F5D7254C8C89A
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. THOMPSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1309 JUDY REAGAN LANE
 City KNOXVILLE State TN Zip Code 37931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2021
Transaction ID : ADC6AEFAF9D284FF4B3E
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2056 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1309 JUDY REAGAN LN
 City KNOXVILLE State TN Zip Code 37931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : A294018B885464F1FBDC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. THOMPSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1309 JUDY REAGAN LN
 City KNOXVILLE State TN Zip Code 37931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **06 / 12 / 2021**
Transaction ID : A697918B985324DF787D
 Amount of Each Receipt this Period 25.00
 Memo Item

C. THOMPSON, JOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 RICHLAND RD
 City SAN MARCOS State CA Zip Code 92069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HHP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A290416E7EC654470B2E
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2057 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2021

Transaction ID : A61B15D3866D24B46BF6

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2021

Transaction ID : ADD26F9CB2466440FBDE

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2021

Transaction ID : ABBB8D93237904851816

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2058 OF 3012		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021

Transaction ID : AD5B7BD6945A446A5BC1

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021

Transaction ID : AD2AF0D835C7542778A1

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021

Transaction ID : A9812F9A3B5384D8183D

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2059 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021

Transaction ID : A5D846EE0609F4B17AF9

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021

Transaction ID : AA02F452CFB1843B6BAB

Amount of Each Receipt this Period
10.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2021

Transaction ID : A9B3320B244344E38889

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2060 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
705.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A947B0530D326472E886

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
740.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : AED12690B5400470FBAE

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
740.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2021

Transaction ID : A02B81584855D4D90B0D

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2061 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021

Transaction ID : A4646324200B1417B9BA

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021

Transaction ID : A7560D6B00E724870942

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMPSON, KAREN, , ,

Mailing Address 104 ALAN DRIVE

City NEWARK	State DE	Zip Code 19711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) D & S WAREHOUSING, INC.	Occupation (for Individual) CORPORATE SECRETARY/ONE OF C
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021

Transaction ID : A46DBBB538EEF427F9B9

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2062 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1504 LYNWOOD LN
 City WHITE LAKE State MI Zip Code 48383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FORD MOTOR COMP. Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 29 / 2021
Transaction ID : ACBF1B722714644C4A4D
 Amount of Each Receipt this Period 35.00
 Memo Item

B. THOMPSON, MITRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3260 GARDENWOOD DRIVE
 City LELAND State NC Zip Code 28451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 26 / 2021
Transaction ID : AD2AF0DD7D0AA4478972
 Amount of Each Receipt this Period 50.00
 Memo Item

C. THOMPSON, MITRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3260 GARDENWOOD DRIVE
 City LELAND State NC Zip Code 28451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A0BCF703942704D34A9C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2063 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, MITRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3260 GARDENWOOD DRIVE
 City LELAND State NC Zip Code 28451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 26 / 2021
Transaction ID : A976189556D824170AFF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. THOMPSON, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 OLDBROOK LANE
 City PORT HURON State MI Zip Code 48060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 24 / 2021
Transaction ID : A012C9D455E7447BF890
 Amount of Each Receipt this Period 50.00
 Memo Item

C. THOMPSON, PATTI, , , MA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 1ST ST SUITE 10
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PSYCHOTHERAPIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2021
Transaction ID : A38FB3F8B2E7D4F8EA22
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2064 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, PATTI, , MA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 1ST ST SUITE 10

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PSYCHOTHERAPIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 04 / 19 / 2021
Transaction ID : A24B73534D57347B8B48

Amount of Each Receipt this Period
 100.00

Memo Item

B. THOMPSON, PATTI, , MA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 1ST ST SUITE 10

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PSYCHOTHERAPIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 05 / 19 / 2021
Transaction ID : A44BE553F412B4578902

Amount of Each Receipt this Period
 100.00

Memo Item

C. THOMPSON, PATTI, , MA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 1ST ST SUITE 10

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) PSYCHOTHERAPIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 06 / 19 / 2021
Transaction ID : A06D606DC6F31483BA32

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2065 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 116 C ST SW
 City QUINCY State WA Zip Code 98848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : AD57A443D5C2D40609EB
 Amount of Each Receipt this Period 150.00
 Memo Item

B. THOMPSON, ROY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4208 N 27TH ST
 City THOMA State WA Zip Code 98407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 29 / 2021**
Transaction ID : A162D16AE917040CB911
 Amount of Each Receipt this Period 250.00
 Memo Item

C. THOMPSON, STANLEY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 563
 City IONE State WA Zip Code 99139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : A07D5A9CBEE6A4806A9A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2066 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THOMPSON, STANLEY, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 563
 City IONE State WA Zip Code 99139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2021
Transaction ID : AC6E9134557C04CF3BAA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. THONGOUTHAIHIP, VIYADA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 SW 3RD AV.
 City PORTLAND State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : AE5517443FD594C6599B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. THONGOUTHAIHIP, VIYADA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 SW 3RD AV.
 City PORTLAND State OR Zip Code 97201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A20349AB14F1C453F8E0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 2067 OF 3012
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. THONGOUTHATHIP, VIYADA, , ,

Mailing Address 1414 SW 3RD AV.

City PORTLAND	State OR	Zip Code 97201
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2021

Transaction ID : A1FDDF7FD85454A35A66

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THONGOUTHATHIP, VIYADA, , ,

Mailing Address 1414 SW 3RD AV.

City PORTLAND	State OR	Zip Code 97201
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : A50ACFCB755534B6998D

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. THORN, DIANA, , ,

Mailing Address 7379 SHEPARD MESA RD

City CARPINTERIA	State CA	Zip Code 93013
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : A92DB2DE046EE4003BC5

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2068 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THORNE, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1011
 City MILLBROOK State NY Zip Code 12545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AE57CACE5CA444EF7891
 Amount of Each Receipt this Period 35.00
 Memo Item

B. THORNTON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1230 MILLERS LN
 City MANAKIN SABOT State VA Zip Code 23103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A927DCF425C1D41CA815
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TIGRETT, PAT KERR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 WAGNER PLACE PH
 City MEMPHIS State TN Zip Code 38103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT KERR INC Occupation (for Individual) COUTURE DESIGNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 25 / 2021
Transaction ID : A3F05801043904F72B47
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2069 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TIGRETT, PAT KERR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 WAGNER PLACE
 PH
 City MEMPHIS State TN Zip Code 38103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT KERR INC Occupation (for Individual) COUTURE DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A9E57F885BEDF47969A4
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TIGRETT, PAT KERR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 WAGNER PLACE
 PH
 City MEMPHIS State TN Zip Code 38103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAT KERR INC Occupation (for Individual) COUTURE DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A56EFE4270F0F4155A19
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TILLANDER, ROBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5445 S PINE AVE
 City OCALA State FL Zip Code 34480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORIDA METAL BUILDING SERVICES Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2021
Transaction ID : AD27244E98C6D4949834
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2070 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TILLMAN, DEBBIE, E., MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5073 QUAY ROAD R

City SAN JON	State NM	Zip Code 88434
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2021

Transaction ID : ABE6FD4C2411E4448BA2

Amount of Each Receipt this Period
50.00

Memo Item

B. TILLMAN, DEBBIE, E., MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5073 QUAY ROAD R

City SAN JON	State NM	Zip Code 88434
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2021

Transaction ID : A62899170CBD44583AE6

Amount of Each Receipt this Period
50.00

Memo Item

C. TIMM, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 911 E MAIN STREET

City MEDARYVILLE	State IN	Zip Code 47957
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
201.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2021

Transaction ID : A9FD6DE22C42E4E5AADD

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2071 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TIMM, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 911 E MAIN STREET

City MEDARYVILLE	State IN	Zip Code 47957
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2021

Transaction ID : AAD460A76BCFF4542ADD

Amount of Each Receipt this Period
26.25

Memo Item

B. TIMM, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 911 E MAIN STREET

City MEDARYVILLE	State IN	Zip Code 47957
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2021

Transaction ID : A3AFF6B47285C4F35916

Amount of Each Receipt this Period
35.00

Memo Item

C. TIMM, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 911 E MAIN STREET

City MEDARYVILLE	State IN	Zip Code 47957
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
271.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2021

Transaction ID : AFA2673007093438C88A

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	96.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2072 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TISO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 MADISON HILL ROAD
 City SUFFERN State NY Zip Code 10901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOWN OF RAMAPO Occupation (for Individual) FIRE INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A8D3CC21AE56945A0AE1
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TISO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 MADISON HILL ROAD
 City SUFFERN State NY Zip Code 10901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOWN OF RAMAPO Occupation (for Individual) FIRE INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A667D595B25C34991AFC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TISO, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 MADISON HILL ROAD
 City SUFFERN State NY Zip Code 10901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOWN OF RAMAPO Occupation (for Individual) FIRE INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A63A94977CEC54AAD824
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2073 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TITIZIAN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19063 KINGSBURY STREET
 City PORTER RANCH State CA Zip Code 91326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A3711A0C461744FFC8E4
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TITUS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4850 WRIGHTSBORO ROAD
 City GROVETOWN State GA Zip Code 30813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AD10380D3CC66416CA38
 Amount of Each Receipt this Period 35.00
 Memo Item

C. TITUS, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 E LAKEVIEW BLVD.
 City ERIE State PA Zip Code 16504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A004B0D6F0839435D924
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2074 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TOLLIVER, KELLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1199 FIFE RD
 City WILMINGTON State OH Zip Code 45177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONNECTION Occupation (for Individual) INFORMATION TECHNOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A1F90F522EF084778A70
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TOMARCHIO, FREDRIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13327 SPRINGWOOD COURT
 City ELLICOTT CITY State MD Zip Code 21042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOMARCHIO ENTERPRISES,LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A2102394268B549F0BBF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TOMARCHIO, FREDRIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13327 SPRINGWOOD COURT
 City ELLICOTT CITY State MD Zip Code 21042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOMARCHIO ENTERPRISES,LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AAD5143261C514698842
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2075 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TONKIN, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 SHULTZ RD
 City HASTINGS State MI Zip Code 49058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE TOWNSHIP, BARRY COOUNTY MI Occupation (for Individual) TOWNSHIP TREASURER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A43301E9375BC4217928
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. TONKIN, ARLENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 SHULTZ RD
 City HASTINGS State MI Zip Code 49058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOPE TOWNSHIP, BARRY COOUNTY MI Occupation (for Individual) TOWNSHIP TREASURER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A6ECC3E9441FD43669CA
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. TOOMEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3517 SNOWY EGRET WAY
 City JACKSONVILLE BEACH State FL Zip Code 32250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2021
Transaction ID : A5C982735D5B8465094F
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2076 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TOOMEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3517 SNOWY EGRET WAY
 City JACKSONVILLE BEACH State FL Zip Code 32250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER BROKER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2021
Transaction ID : AF0FBB187580A4FE4904
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TOPLEAN, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 LIVOTI AVE
 City FAIR OAKS State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDERLY INN Occupation (for Individual) SELF EMPLOYEE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : A1FD524434F0543C9B7D
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TOPLEAN, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 LIVOTI AVE
 City FAIR OAKS State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDERLY INN Occupation (for Individual) SELF EMPLOYEE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : AC5A08ED6E33948AB9D8
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2077 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TOPLEAN, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 LIVOTI AVE
 City FAIR OAKS State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDERLY INN Occupation (for Individual) SELF EMPLOYEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A1C6E4603E32449469A9
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TOPLEAN, SAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 LIVOTI AVE
 City FAIR OAKS State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELDERLY INN Occupation (for Individual) SELF EMPLOYEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A3C9EB2166717401C869
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TORIELLI, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 CIRCLE DRIVE NORTH SUITE NO. 105
 City PISCATAWAY State NJ Zip Code 08854-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A58B12477100E43A4BEA
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2078 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TORIELLI, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 CIRCLE DRIVE NORTH
 SUITE NO. 105
 City PISCATAWAY State NJ Zip Code 08854-3723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A3141C50619B849C9BDA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TORRES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16280 LANDON CT.
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOD FOR LIFE Occupation (for Individual) BAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 28 / 2021
Transaction ID : A9880606D0E574E639C2
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TORRES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16280 LANDON CT.
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOD FOR LIFE Occupation (for Individual) BAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 28 / 2021
Transaction ID : A1C1C62947FB8406AB4B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2079 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TORRES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16280 LANDON CT.
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOD FOR LIFE Occupation (for Individual) BAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A20C0EF055607431A904
 Amount of Each Receipt this Period 100.00
 Memo Item

B. TORRES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16280 LANDON CT.
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOD FOR LIFE Occupation (for Individual) BAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 28 / 2021
Transaction ID : A0AB425D9BF1447DEA17
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TORRES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16280 LANDON CT.
 City RIVERSIDE State CA Zip Code 92504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOOD FOR LIFE Occupation (for Individual) BAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 28 / 2021
Transaction ID : AAE5EA4FA75E046DBB49
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2080 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TORRES, LIDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 611 FAMOSO HILLS DRI
 City BAKERSFIELD State CA Zip Code 93308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KCCD Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A31608DAAA7B84695BC1
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TOTH, MIKLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 EAST 89TH STREET 15F
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2021
Transaction ID : A848397E475764EA6BAF
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TOTH, MIKLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 EAST 89TH STREET 15F
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 05 / 2021
Transaction ID : AE2B560787B1546D580A
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2081 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TOTH, MIKLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 EAST 89TH STREET
 15F
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2021
Transaction ID : A95C1B47EE4304D24AF1
 Amount of Each Receipt this Period 100.00
 Memo Item

B. TOTH, MIKLOS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 EAST 89TH STREET
 15F
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 05 / 2021
Transaction ID : A3410F8FD197D45249FC
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TOWNSEND, JOHN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 RD 3.2 NE
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 23 / 2021
Transaction ID : AFA7CBC8563DE4A2593B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2082 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TOWNSEND, JOHN, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8306 RD 3.2 NE
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **06 / 23 / 2021**
Transaction ID : A36332899FEF0452B981
 Amount of Each Receipt this Period 100.00
 Memo Item

B. TRACY, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 MADDOCKS AVE
 City ELLSWORTH State ME Zip Code 04605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **03 / 11 / 2021**
Transaction ID : A64107F9A98C644A29AF
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TRACY, ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 MADDOCKS AVE
 City ELLSWORTH State ME Zip Code 04605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **03 / 13 / 2021**
Transaction ID : AA4E7F2E433FA4834A33
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2083 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TRACY, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 MADDOCKS AVE

City ELLSWORTH	State ME	Zip Code 04605
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2021

Transaction ID : AC06984EBABD14988A1C

Amount of Each Receipt this Period
50.00

Memo Item

B. TRACY, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 MADDOCKS AVE

City ELLSWORTH	State ME	Zip Code 04605
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2021

Transaction ID : AD597E39A3D4940A7848

Amount of Each Receipt this Period
35.00

Memo Item

C. TRACY, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 MADDOCKS AVE

City ELLSWORTH	State ME	Zip Code 04605
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2021

Transaction ID : ACA02B464D16643FF902

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2084 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TRACY, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 MADDOCKS AVE

City ELLSWORTH	State ME	Zip Code 04605
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2021

Transaction ID : ADBE11EEDA85D45DBA0:

Amount of Each Receipt this Period
35.00

Memo Item

B. TRACY, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 MADDOCKS AVE

City ELLSWORTH	State ME	Zip Code 04605
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2021

Transaction ID : A5905DB09D33F441ABF9

Amount of Each Receipt this Period
50.00

Memo Item

C. TRACY, ERNEST, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 MADDOCKS AVE

City ELLSWORTH	State ME	Zip Code 04605
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2021

Transaction ID : A345560B245C944D1B07

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2085 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TRAINA, ROCKEY, , , JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24522 MEADOW LN

City PORTER	State TX	Zip Code 77365
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2021

Transaction ID : ACA42A5821C18484C895

Amount of Each Receipt this Period
300.00

Memo Item

B. TRANZOW, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 304, 1430 FOX ACRES DRIV

City RED FEATHER LAKES	State CO	Zip Code 80545
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2021

Transaction ID : A1D8FC20BFA2344F798D

Amount of Each Receipt this Period
50.00

Memo Item

C. TRANZOW, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. BOX 304, 1430 FOX ACRES DRIV

City RED FEATHER LAKES	State CO	Zip Code 80545
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2021

Transaction ID : A79F65C014E1F487CBFA

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2086 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TREADWAY, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3264 SMOKETOWN RD
 City SPRING GROVE State PA Zip Code 17362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. T. TREADWAY, INC. Occupation (for Individual) PEST CONTROL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 22 / 2021**
Transaction ID : A78BEOC9AF47445D7AB9
 Amount of Each Receipt this Period 250.00
 Memo Item

B. TREADWAY, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3264 SMOKETOWN RD
 City SPRING GROVE State PA Zip Code 17362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. T. TREADWAY, INC. Occupation (for Individual) PEST CONTROL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 22 / 2021**
Transaction ID : ACCBEAABD39754381A14
 Amount of Each Receipt this Period 250.00
 Memo Item

C. TREADWAY, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3264 SMOKETOWN RD
 City SPRING GROVE State PA Zip Code 17362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. T. TREADWAY, INC. Occupation (for Individual) PEST CONTROL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : AB7FD7BEBEC75A4FC1B07
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2087 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TREADWAY, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3264 SMOKETOWN RD
 City SPRING GROVE State PA Zip Code 17362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. T. TREADWAY, INC. Occupation (for Individual) PEST CONTROL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : AB592C13C32224A5D819
 Amount of Each Receipt this Period 250.00
 Memo Item

B. TREADWAY, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3264 SMOKETOWN RD
 City SPRING GROVE State PA Zip Code 17362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. T. TREADWAY, INC. Occupation (for Individual) PEST CONTROL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A2DEBF272465A4948949
 Amount of Each Receipt this Period 250.00
 Memo Item

C. TREADWAY, JEANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3264 SMOKETOWN RD
 City SPRING GROVE State PA Zip Code 17362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H. T. TREADWAY, INC. Occupation (for Individual) PEST CONTROL
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : A1EDD6D4E1493467C861
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2088 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TREITZ, FRED, , ,

Mailing Address **PO BOX 275 15 COVINGTON LAKES DRIV**

City **GOULDSBORO** State **PA** Zip Code **18424**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 17 / 2021**
Transaction ID : A9DDFD748DE734043811

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TREITZ, FRED, , ,

Mailing Address **PO BOX 275 15 COVINGTON LAKES DRIV**

City **GOULDSBORO** State **PA** Zip Code **18424**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **06 / 17 / 2021**
Transaction ID : A4AC42C44461A4F00A00

Amount of Each Receipt this Period **50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TRICK, J., F., MR,

Mailing Address **12162 RIVERVISTA DR**

City **COTTONDALE** State **AL** Zip Code **35453**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **04 / 29 / 2021**
Transaction ID : A33CB9E294BDC4DA293A

Amount of Each Receipt this Period **300.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **400.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2089 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TRITTLER, REGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 GODWIN LN
 City SAINT LOUIS State MO Zip Code 63124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MOHR PARTNERS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021
Transaction ID : A80E2B0B82D094DF68B1
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. TRUDELL, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1017
 City NEWBERG State OR Zip Code 97132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2021
Transaction ID : AD3B934070D414724836
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. TRUELOVE, BOBBY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 562
 City GARRISON State TX Zip Code 75946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : A64B4E85F2F39475B897
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2090 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TRUE, RICHARD, CUSHING, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 277 ROYAL POINCIANA WAY, 218
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDISON REALTY GROUP INC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : AE3E019AD9F4C4451939
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TRUE, RICHARD, CUSHING, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 277 ROYAL POINCIANA WAY, 218
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADDISON REALTY GROUP INC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AC069F37414E348C38A5
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TRUSLER, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HILLVIEW CT
 City CORTLANDT MANOR State NY Zip Code 10567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENDRICK HUDSON SCHOOL DISTRICT Occupation (for Individual) MONITOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A65EF9671E2B74CCEB65
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2091 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TRUSLER, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 HILLVIEW CT
 City CORTLANDT MANOR State NY Zip Code 10567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HENDRICK HUDSON SCHOOL DISTRICT Occupation (for Individual) MONITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : ABFFFBC1231244D3A991
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TUCKER, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5225 EDGEWOOD RD
 City LITTLE ROCK State AR Zip Code 72207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2021
Transaction ID : A3BB7C34C11E84CC0A4B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TUCKER, DIANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5225 EDGEWOOD RD
 City LITTLE ROCK State AR Zip Code 72207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A7BED7CB4D8594534832
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2092 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TUCKER, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5225 EDGEWOOD RD

City LITTLE ROCK	State AR	Zip Code 72207
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : A8AC43706E6424BD6B36

Amount of Each Receipt this Period
100.00

Memo Item

B. TUCKER, DIANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5225 EDGEWOOD RD

City LITTLE ROCK	State AR	Zip Code 72207
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2021

Transaction ID : A8117D441744B4860895

Amount of Each Receipt this Period
100.00

Memo Item

C. TUCKER, GEORGE, C, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5819 PECAN VALLEY LANE

City SAN ANGELO	State TX	Zip Code 76904
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCHER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2021

Transaction ID : A8558511A8D4E4577A95

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2093 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TUCKER, GEORGE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5819 PECAN VALLEY LANE
 City SAN ANGELO State TX Zip Code 76904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A064689AC556542D9A6F
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. TUCKER, GEORGE, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5819 PECAN VALLEY LANE
 City SAN ANGELO State TX Zip Code 76904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2021
Transaction ID : A83C7ECF63218482A9A4
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TUCKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5261 SE BRANDYWINE WAY 23
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2021
Transaction ID : A90E5238F4FA04D43AB1
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2094 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TUCS, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8995 261ST AVE NW
 City ZIMMERMAN State MN Zip Code 55398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUCS EQUIPMENT.COM Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : AFB32CEBB09BF465AA31
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. TUCS, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8995 261ST AVE NW
 City ZIMMERMAN State MN Zip Code 55398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUCS EQUIPMENT.COM Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : AA53B2AFBAB744D1DA4E
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. TUCS, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8995 261ST AVE NW
 City ZIMMERMAN State MN Zip Code 55398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUCS EQUIPMENT.COM Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A18BC86E903FB48549CF
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2095 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TUCS, MARTY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8995 261ST AVE NW
 City ZIMMERMAN State MN Zip Code 55398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUCS EQUIPMENT.COM Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : AB0DCA5DC604E4C5783E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. TUNELL, EARL, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 342
 City PIMA State AZ Zip Code 85543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A6D621B140104401D858
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. TUOHEY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 498 SPRING DR
 City MARENGO State IL Zip Code 60152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE PRIDE STORES INC Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : AA4E8835094644F3BA25
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2096 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TUOHY, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5339 TRILLIUM CT
 City WEST BLOOMFIELD State MI Zip Code 48323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOS MEDICAL Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 16 / 2021
Transaction ID : ADBF9BB06E41D4A09A75
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TUOHY, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5339 TRILLIUM CT
 City WEST BLOOMFIELD State MI Zip Code 48323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOS MEDICAL Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 03 / 2021
Transaction ID : A1AB414DFEA994A9692A
 Amount of Each Receipt this Period 25.00
 Memo Item

C. TUOHY, LEA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5339 TRILLIUM CT
 City WEST BLOOMFIELD State MI Zip Code 48323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOS MEDICAL Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2021
Transaction ID : AD622310B8204488FB2B
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2097 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TURGEON, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 PALM IS NE
 City CLEARWATER BEACH State FL Zip Code 33767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BIOTECH CO Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : A26D766AD4B9F43ACA6D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TURNER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 ALLEMANIA DR
 City NEW BRAUNFELS State TX Zip Code 78132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AF551A06A69114BB1982
 Amount of Each Receipt this Period 35.00
 Memo Item

C. TUTT, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 PRESTON COURT
 City BOSSIER CITY State LA Zip Code 71111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AE5D8ECFB2C324E8AB3F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2098 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TYREE, BELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9924 S STATE RD 37
 City PAOLI State IN Zip Code 47454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRENCH LICK RESORT CASINO Occupation (for Individual) REVENUE AUDITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A0243E8A6351D4DDCA3F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TYREE, BELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9924 S STATE RD 37
 City PAOLI State IN Zip Code 47454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FRENCH LICK RESORT CASINO Occupation (for Individual) REVENUE AUDITOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 16 / 2021
Transaction ID : ADD802FBD1D904F638F4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TYSON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 E COCONINO PL
 City CHANDLER State AZ Zip Code 85249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2021
Transaction ID : AF40BAA74AE3C462C8E2
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶
TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2099 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TYSON, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 E COCONINO PL
 City CHANDLER State AZ Zip Code 85249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 25 / 2021
Transaction ID : A7577A4C303BC445698D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. UHLHORN, CANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 TWIN LAKES RD
 City PIPERTON State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 04 / 05 / 2021
Transaction ID : AC2228C50C1FB451E8F6
 Amount of Each Receipt this Period 25.00
 Memo Item

C. UHLHORN, CANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 TWIN LAKES RD
 City PIPERTON State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 04 / 30 / 2021
Transaction ID : A8569FC14A3974828854
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2100 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. UHLHORN, CANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 TWIN LAKES RD

City PIPERTON	State TN	Zip Code 38017
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2021

Transaction ID : AA50A6B9F4F324506968

Amount of Each Receipt this Period
25.00

Memo Item

B. UHLHORN, CANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 TWIN LAKES RD

City PIPERTON	State TN	Zip Code 38017
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2021

Transaction ID : ADF8B4153CB3441E891E

Amount of Each Receipt this Period
35.00

Memo Item

C. UHLHORN, CANDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 TWIN LAKES RD

City PIPERTON	State TN	Zip Code 38017
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2021

Transaction ID : A5409FF848B734A2EAAC

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2101 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. UHLHORN, CANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 TWIN LAKES RD
 City PIPERTON State TN Zip Code 38017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A5981CDCF4B864E87BFB
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ULLRICH, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 339
 City HASKELL State OK Zip Code 74436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 01 / 2021
Transaction ID : ABADE67B284C8411DBF4
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ULLRICH, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 339
 City HASKELL State OK Zip Code 74436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 01 / 2021
Transaction ID : AEA6CC9B347434E869C8
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2102 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. UNDERWOOD, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2110 ROOSEVELT AVE
 City ALTADENA State CA Zip Code 91001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAZZLE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A7E680B067D224DF5807
 Amount of Each Receipt this Period 35.00
 Memo Item

B. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 EAST BELL RD SUITE 107
 City SCOTTSDALE State AZ Zip Code 85260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 20 / 2021
Transaction ID : ADC2A7EFAAC254CAE846
 Amount of Each Receipt this Period 35.00
 Memo Item

C. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 EAST BELL RD SUITE 107
 City SCOTTSDALE State AZ Zip Code 85260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 27 / 2021
Transaction ID : AC2E81D8C6C274F78865
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2103 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 EAST BELL RD
 SUITE 107
 City SCOTTSDALE State AZ Zip Code 85260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 04 / 20 / 2021
Transaction ID : ADDCD026E7452440388B
 Amount of Each Receipt this Period 35.00
 Memo Item

B. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 EAST BELL RD
 SUITE 107
 City SCOTTSDALE State AZ Zip Code 85260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 04 / 27 / 2021
Transaction ID : A0CA1C64B6F2F462B991
 Amount of Each Receipt this Period 50.00
 Memo Item

C. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10115 EAST BELL RD
 SUITE 107
 City SCOTTSDALE State AZ Zip Code 85260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A4D6D4F8EAF4C4F27AA2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2104 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10115 EAST BELL RD
SUITE 107

City SCOTTSDALE State AZ Zip Code 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021

Transaction ID : A5185175A78D44C28A8A

Amount of Each Receipt this Period
50.00

Memo Item

B. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10115 EAST BELL RD
SUITE 107

City SCOTTSDALE State AZ Zip Code 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2021

Transaction ID : A8E7C5E02B3744CF6B30

Amount of Each Receipt this Period
35.00

Memo Item

C. URBANEK, GEORGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10115 EAST BELL RD
SUITE 107

City SCOTTSDALE State AZ Zip Code 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021

Transaction ID : ACDBF0C0BD2544686A45

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2105 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. URIBE, ROD, , , DMD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35905 HENDRICKS RD
 City METTER State GA Zip Code 30439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF. EAST GA ORAL SURGERY Occupation (for Individual) ORAL SURGEON
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AFE78A71734844F62A02
 Amount of Each Receipt this Period 35.00
 Memo Item

B. URIZAR, JAMES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8205 SPRING ARTS AVE
 City LAS VEGAS State NV Zip Code 89129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 13 / 2021
Transaction ID : AE7A1F780E03A4FBCA4D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. USZYNSKI, CHET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6505 SIMMONS RD
 City NORTH RICHLAND HILLS State TX Zip Code 76182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : ACC6333170A344A248E6
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2106 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VAGT, JUDITH, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2457 PRESIDENTIAL DR
 City TULARE State CA Zip Code 93274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : A374D4080F67844808F5
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. VAN DER HOOF, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1756 EL VISTA CIR
 City ARCADIA State CA Zip Code 91006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MD LABORATORY Occupation (for Individual) SCIENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : AD39B56A069124D1B9F1
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. VAN ELSLANDER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 THREE MILE DR
 City GROSSE POINTE State MI Zip Code 48230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AA6276BCF4C50457F8D4
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2107 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VAN ELSLANDER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 THREE MILE DR
 City GROSSE POINTE State MI Zip Code 48230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A0E88533FAE7C4977A3C
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VAN GILDER, DELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1991 E ALAMEDA 11
 City DENVER State CO Zip Code 80209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : AC2FCC7E2C3CD43708F2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. VAN HOOK, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10849 MILE RD
 City NEW LEBANON State OH Zip Code 44534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) JOE VAN HOOK TRUCKING OWNER C
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A0C74AC8374984E198B9
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2108 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VAN HOOK, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10849 MILE RD
 City NEW LEBANON State OH Zip Code 44534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) JOE VAN HOOK TRUCKING OWNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A797BEA72D9ED4565851
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VAN METER, MARGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 MCCORMICK PLACE
 City DEXTER State MI Zip Code 48130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 04 / 23 / 2021
Transaction ID : A077C9DD8F73D41BBB1D
 Amount of Each Receipt this Period 250.00
 Memo Item

C. VAN NATTA, K.C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24255 VAN NATTA RD.
 City RAINIER State OR Zip Code 97048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 13 / 2021
Transaction ID : ABC11D29395124E488F8
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2109 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VAN NATTA, K.C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24255 VAN NATTA RD.
 City RAINIER State OR Zip Code 97048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : A3870F878AF2C4DE8991
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. VANCE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3238 VILLA STRADA WAY
 City ORLANDO State FL Zip Code 32835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2021
Transaction ID : AC10D24E897E04282B38
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. VANCE, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3238 VILLA STRADA WAY
 City ORLANDO State FL Zip Code 32835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2021
Transaction ID : AC809F25A788D4C859F5
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2110 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VANDENHEUVEL, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1661 LIME KILN TD
 City GREEN BAY State WI Zip Code 54311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A19B9C9A18549470A826
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VANDENHEUVEL, SANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1661 LIME KILN TD
 City GREEN BAY State WI Zip Code 54311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2021
Transaction ID : AF32A6AC6B50E415CAE1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VANDER LEEST, ARLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O BOX 375
 City SULLY State IA Zip Code 50251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SULLY Occupation (for Individual) TRANSPORTATION
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : A4CB2A549BBA1483785D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2111 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VANDERHEYDEN, WILLIAM, , ,

Mailing Address **909 MARINE DRIVE UNIT 104**

City **BELLINGHAM** State **WA** Zip Code **98225**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 24 / 2021**

Transaction ID : A655C6AA76F8543BB97A

Amount of Each Receipt this Period **50.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VANDERHEYDEN, WILLIAM, , ,

Mailing Address **909 MARINE DRIVE UNIT 104**

City **BELLINGHAM** State **WA** Zip Code **98225**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **06 / 24 / 2021**

Transaction ID : A6E7C8C6011AF41199C6

Amount of Each Receipt this Period **50.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VANDYK, JULIE, , ,

Mailing Address **4477 S MARION PL**

City **CHANDLER** State **AZ** Zip Code **85249**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **L3HARRIS FOS** Occupation (for Individual) **STAFF CONTRACTS MANAGER**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **06 / 03 / 2021**

Transaction ID : AA70590402B3B4B7682C

Amount of Each Receipt this Period **35.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **135.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2112 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VANEPPE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7444
 City MYRTLE BEACH State SC Zip Code 29572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2021
Transaction ID : A02B340A8499A4714A1A
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. VANEPPE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7444
 City MYRTLE BEACH State SC Zip Code 29572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2021
Transaction ID : A572EA45CAED94014968
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. VANEPPE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7444
 City MYRTLE BEACH State SC Zip Code 29572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A7E4514B4ECE7472EA62
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2113 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VANEPPE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7444
 City MYRTLE BEACH State SC Zip Code 29572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A2685F51467E848009F6
 Amount of Each Receipt this Period 100.00
 Memo Item

B. VANN, SUSIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2397 ZUMWALT RD
 City WILLIAMS State CA Zip Code 95987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A7BECE128EF4046CAA2F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. VAZQUEZ, OSCAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5955 FERN ST
 City STOCKTON State CA Zip Code 95207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HAIRDRESSER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A75508FED50E54201911
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2114 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VEGA, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12076 NW 98TH AVE
 City HIALEAH State FL Zip Code 33018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORIDA ENGINEERING & DEVELOPMENT CORP Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A4F5369B5C17C4F43AF7
 Amount of Each Receipt this Period 35.00
 Memo Item

B. VENNER, ALICE, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15263 PONDEROSA LOOP
 City LA PINE State OR Zip Code 97739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 02 / 03 / 2021
Transaction ID : A6390429D2F1B431FA1D
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VENNER, ALICE, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15263 PONDEROSA LOOP
 City LA PINE State OR Zip Code 97739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 02 / 26 / 2021
Transaction ID : A3AF80D4BBC6D4445B71
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2115 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VENNER, ALICE, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15263 PONDEROSA LOOP
 City LA PINE State OR Zip Code 97739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 03 / 19 / 2021
Transaction ID : AD1E533EE2C474B1C94D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VENNER, ALICE, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15263 PONDEROSA LOOP
 City LA PINE State OR Zip Code 97739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A17C093E512AC4BB6893
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VENNER, ALICE, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15263 PONDEROSA LOOP
 City LA PINE State OR Zip Code 97739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 04 / 08 / 2021
Transaction ID : AA999F4F9CF0E4FDA86F
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2116 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VENTO III, AMADO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 503

City LA FERIA	State TX	Zip Code 78559
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEXAS SCALES INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : AD89325F4E7B54CE1AF3

Amount of Each Receipt this Period
 35.00

Memo Item

B. VERDERY, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CLUBWOOD CT

City WINTER SPRINGS	State FL	Zip Code 32708
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : AB4CDC04401D448B1BA9

Amount of Each Receipt this Period
 35.00

Memo Item

C. VERDERY, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CLUBWOOD CT

City WINTER SPRINGS	State FL	Zip Code 32708
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A5EEAafb15A0044279FE

Amount of Each Receipt this Period
 10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2117 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VERDONE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 SENGA ROAD
 City NORWALK State CT Zip Code 06854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : A1676B5CAF8504BE3A12
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. VERDONE, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 SENGA ROAD
 City NORWALK State CT Zip Code 06854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : A5D918938F930487BDE
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. VEREBAY, LEONARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 688 TERNBERRY FOREST DRIVE
 City THE VILLAGES State FL Zip Code 32162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AB854C94062A04F1BB57
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2118 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VESELY, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N58W18080 BIRCH LN
 City MENOMONEE FALLS State WI Zip Code 53051-5536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARGO IND INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2021
Transaction ID : A05191F415D8F46939A6
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VICKERS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5339 NW SOUTH CRISONA CIR
 City PORT SAINT LUCIE State FL Zip Code 34986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIX SUPERMARKET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2021
Transaction ID : A0F2084121E8E44D997D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. VICKERS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5339 NW SOUTH CRISONA CIR
 City PORT SAINT LUCIE State FL Zip Code 34986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIX SUPERMARKET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 22 / 2021
Transaction ID : A7119B055B3304283AFF
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2119 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VICKERS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5339 NW SOUTH CRISONA CIR
 City PORT SAINT LUCIE State FL Zip Code 34986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIX SUPERMARKET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A2471D250AEE64A7FB4F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. VICKERS, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5339 NW SOUTH CRISONA CIR
 City PORT SAINT LUCIE State FL Zip Code 34986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIX SUPERMARKET Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 22 / 2021
Transaction ID : AB4F3049BF3B74728923
 Amount of Each Receipt this Period 100.00
 Memo Item

C. VIEIRA, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2995 SAN MICHELE
 City CHOWCHILLA State CA Zip Code 93610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CATTLE HAY BROKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A269D704FD012421E941
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2120 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VIEIRA, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2995 SAN MICHELE
 City CHOWCHILLA State CA Zip Code 93610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CATTLE HAY BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : ADEDBD298210F486A9D9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VIELE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1518 GARFIELD ST
 City HOLLYWOOD State FL Zip Code 33020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2021
Transaction ID : AE127800CBA484E5ABE2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VIELE, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1518 GARFIELD ST
 City HOLLYWOOD State FL Zip Code 33020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 12 / 2021
Transaction ID : ABEE8DF8CC4FA4ADE9E1
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2121 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VIKLUND, KEVIN, , ,

Mailing Address 4815 OLD STUMP DRIVE NW

City GIG HARBOR	State WA	Zip Code 98332
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VOLVO GROUP TRUCKS	Occupation (for Individual) SENIOR SALES CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2021

Transaction ID : AF9D661DE0D4242C8AB5

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VIKLUND, KEVIN, , ,

Mailing Address 4815 OLD STUMP DRIVE NW

City GIG HARBOR	State WA	Zip Code 98332
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VOLVO GROUP TRUCKS	Occupation (for Individual) SENIOR SALES CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2021

Transaction ID : A0408A970C1EE4A7B82E

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VIKLUND, KEVIN, , ,

Mailing Address 4815 OLD STUMP DRIVE NW

City GIG HARBOR	State WA	Zip Code 98332
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VOLVO GROUP TRUCKS	Occupation (for Individual) SENIOR SALES CONSULTANT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2021

Transaction ID : A2FEE3FBF55984754889

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2122 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VIKLUND, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4815 OLD STUMP DRIVE NW
 City GIG HARBOR State WA Zip Code 98332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLVO GROUP TRUCKS Occupation (for Individual) SENIOR SALES CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 24 / 2021
Transaction ID : ADF7A369F6FAB4F84A27
 Amount of Each Receipt this Period 35.00
 Memo Item

B. VIKLUND, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4815 OLD STUMP DRIVE NW
 City GIG HARBOR State WA Zip Code 98332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLVO GROUP TRUCKS Occupation (for Individual) SENIOR SALES CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 24 / 2021
Transaction ID : AD7975C3861B549BABBF
 Amount of Each Receipt this Period 35.00
 Memo Item

C. VIKLUND, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4815 OLD STUMP DRIVE NW
 City GIG HARBOR State WA Zip Code 98332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLVO GROUP TRUCKS Occupation (for Individual) SENIOR SALES CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A879ECABF70DC492480F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2123 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VIKLUND, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4815 OLD STUMP DRIVE NW
 City GIG HARBOR State WA Zip Code 98332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLVO GROUP TRUCKS Occupation (for Individual) SENIOR SALES CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : AD2422A7D67A2492A943
 Amount of Each Receipt this Period 35.00
 Memo Item

B. VIKLUND, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4815 OLD STUMP DRIVE NW
 City GIG HARBOR State WA Zip Code 98332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VOLVO GROUP TRUCKS Occupation (for Individual) SENIOR SALES CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A647636FBD1614DB399D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. VILLALOBOS, RICARDO, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 S WILLOW AVE APT 106
 City FRESNO State CA Zip Code 93727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A938707806DC24998928
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2124 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VILLAVICENCIO, ANA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13930 APPALACHIAN
 City FORT LAUDERDALE State FL Zip Code 33325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 23 / 2021**
Transaction ID : A9D904FBB43044908A21
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VILLAVICENCIO, ANA, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13930 APPALACHIAN
 City FORT LAUDERDALE State FL Zip Code 33325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 23 / 2021**
Transaction ID : A9C3EF33EFA1040EDB85
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VOEKS, J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 EMERALD POINTE DR.
 City HOLLISTER State MO Zip Code 65672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEWART-PETERSON GROUP/INSPIRITY Occupation (for Individual) RISK MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 02 / 2021**
Transaction ID : A28E68D8FDE9D4A8AA9A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2125 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VOEKS, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 680 EMERALD POINTE DR.

City HOLLISTER	State MO	Zip Code 65672
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEWART-PETERSON GROUP/INSPIRITY	Occupation (for Individual) RISK MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2021

Transaction ID : AF0A196AACB444974975

Amount of Each Receipt this Period
250.00

Memo Item

B. VOEKS, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 680 EMERALD POINTE DR.

City HOLLISTER	State MO	Zip Code 65672
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEWART-PETERSON GROUP/INSPIRITY	Occupation (for Individual) RISK MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2021

Transaction ID : A935A5765F5154615A3E

Amount of Each Receipt this Period
250.00

Memo Item

C. VOEKS, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 680 EMERALD POINTE DR.

City HOLLISTER	State MO	Zip Code 65672
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEWART-PETERSON GROUP/INSPIRITY	Occupation (for Individual) RISK MANAGER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2021

Transaction ID : A44E244C6B0D4485681B

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2126 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VOEKS, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 680 EMERALD POINTE DR.

City HOLLISTER	State MO	Zip Code 65672
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEWART-PETERSON GROUP/INSPERITY	Occupation (for Individual) RISK MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : A5FA29C254AE14E358EF

Amount of Each Receipt this Period
250.00

Memo Item

B. VOEKS, J, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 680 EMERALD POINTE DR.

City HOLLISTER	State MO	Zip Code 65672
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEWART-PETERSON GROUP/INSPERITY	Occupation (for Individual) RISK MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2021

Transaction ID : A0DC3E2F31EFE4E0781B

Amount of Each Receipt this Period
250.00

Memo Item

C. VONDERSCHMIDT, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 606 E MIAMI

City HIAWATHA	State KS	Zip Code 66434
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2021

Transaction ID : AA064A6C45682461485D

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2127 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VONDERSCHMIDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 E MIAMI
 City HIAWATHA State KS Zip Code 66434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AF7E5BAAC0E464006A8A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VONDRACHEK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 6TH STREET
 City BELLINGHAM State WA Zip Code 98225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REFRIGERATION CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 13 / 2021
Transaction ID : AB6C3994A08DD41329C7
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VONDRACHEK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 6TH STREET
 City BELLINGHAM State WA Zip Code 98225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REFRIGERATION CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 04 / 2021
Transaction ID : AB5CCFDC8F20C41F5A50
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2128 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VONDRACHEK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 6TH STREET
 City BELLINGHAM State WA Zip Code 98225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REFRIGERATION CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 05 / 2021
Transaction ID : AE24F761BB4BD41B2BC3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. VONDRACHEK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 6TH STREET
 City BELLINGHAM State WA Zip Code 98225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REFRIGERATION CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 13 / 2021
Transaction ID : AA020ADE6AE1B42A9AC1
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VONOGOSKI, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 CHESTER ST
 City SILVERTON State OR Zip Code 97381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 23 / 2021
Transaction ID : ACC3AAE6BF7874E88841
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2129 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VONOGOFSKI, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 CHESTER ST
 City SILVERTON State OR Zip Code 97381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **04 / 08 / 2021**
Transaction ID : AF17FA5696CF54E128A8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VONOGOFSKI, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 CHESTER ST
 City SILVERTON State OR Zip Code 97381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **05 / 08 / 2021**
Transaction ID : A03E3C83DBF31432F8A9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VONOGOFSKI, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 CHESTER ST
 City SILVERTON State OR Zip Code 97381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt **05 / 27 / 2021**
Transaction ID : AC2FC7E638B064A1AA1F
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2130 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VONOGOSKI, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 CHESTER ST
 City SILVERTON State OR Zip Code 97381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A38AF2321D4094469B60
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VOORTMAN, CAROL, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2130 WORTHINGTON AVE
 City BETHLEHEM State PA Zip Code 18017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST LUKES UNIVERSITY HOSPITAL Occupation (for Individual) MED LAB TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A8B2C7D4F59E7487682E
 Amount of Each Receipt this Period 35.00
 Memo Item

C. VO, THUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2163 LADUE DR.
 City POWELL State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEURIG DR PEPPER Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 13 / 2021
Transaction ID : A7EFBC6FEF69A4549A4A
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2131 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VO, THUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2163 LADUE DR.
 City POWELL State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEURIG DR PEPPER Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A1FCCF80D55A44D77B0B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. VREELAND, JULIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 GRANGE ROAD
 City OTISVILLE State NY Zip Code 10963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DAIRY FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A13A744B34BFD4607B9D
 Amount of Each Receipt this Period 35.00
 Memo Item

C. VUKIC, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 1810
 City CHARLESTOWN State RI Zip Code 02813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2021
Transaction ID : A168AEE6C969E40A69FF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2132 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VUKIC, ROLAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 1810
 City CHARLESTOWN State RI Zip Code 02813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 06 / 2021
Transaction ID : AEA918C6A3AB74A5EA17
 Amount of Each Receipt this Period 50.00
 Memo Item

B. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 04 / 25 / 2021
Transaction ID : A77BFCAB622A34A55BD0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 30 / 2021
Transaction ID : ACEE8E21BE4EB481F8DC
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2133 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A5BAFF4F787D341158F1
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : AFF422F7E5364457895C
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A5A2F9D459F664E9AA38
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2134 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A222CE2CAC73543069C5
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2021
Transaction ID : A9DFAD0BCD03E4663A0F
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. VYDRO, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 HENDERSON ST
 City PASSAIC State NJ Zip Code 07055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : A1A8A2D72CEA747C8821
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2135 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. W LEINWEBER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 PINNEYS CT
 City CHESTERTON State IN Zip Code 46304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : A4C5BB66A5AFE4226B9A
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WAAGE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6258 S. MOCCASIN TRAIL
 City GILBERT State AZ Zip Code 85298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A54FB77A8584E4A60AD0
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WADE, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 J DUKE RONEY TRL
 City BURLINGTON State NC Zip Code 27217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) HEATING AND AIR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A8985E03AD8904153A08
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2136 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WADE, JOHN, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address YORKSHIRE SQ
 City CINCINNATI State OH Zip Code 45245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2021
Transaction ID : AAD848D4C447545FCB7A
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WADE, LINDA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19005 LEXI DR
 City ABINGDON State VA Zip Code 24210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 18 / 2021
Transaction ID : A3DA21E5FDB5E403AB59
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. WADE, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1685
 City TROUT CREEK State MT Zip Code 59874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 28 / 2021
Transaction ID : A4DD1A9C1D0B04FF097C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2137 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WADE, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1685
 City TROUT CREEK State MT Zip Code 59874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A90735B344CD041E08E0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WADE, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 1685
 City TROUT CREEK State MT Zip Code 59874
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : ABE81867B9BFF4DEF807
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WAGNER, ANDRE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 BAYWOOD LN
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAGNER DRYWALL INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A0CD51ABC62D43FFBE1
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2138 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WAGNER, ANDRE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 BAYWOOD LN
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAGNER DRYWALL INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 15 / 2021**
Transaction ID : ABBA363119D5944569A0
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WAGNER, ANDRE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 BAYWOOD LN
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAGNER DRYWALL INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : A911DC96D2148430193C
 Amount of Each Receipt this Period 75.00
 Memo Item

C. WAGNER, ANDRE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 BAYWOOD LN
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAGNER DRYWALL INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt **06 / 08 / 2021**
Transaction ID : A7271B3CFB3D44CFB8B9
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2139 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WAGNER, ANDRE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1575 BAYWOOD LN
 City NAPA State CA Zip Code 94558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAGNER DRYWALL INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **06 / 15 / 2021**
Transaction ID : AAA518C995AD74C7283B
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WAGNER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1822 FERN WAY
 City ARNOLD State CA Zip Code 95223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 16 / 2021**
Transaction ID : A337C860D21884DD18E2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WAGNER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1822 FERN WAY
 City ARNOLD State CA Zip Code 95223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 16 / 2021**
Transaction ID : AD745E65DCBC14A57BB3
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2140 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WAID, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 COURT OF PALMS
 402
 City FORT MYERS State FL Zip Code 33908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST FLOOD BARRIERS Occupation (for Individual) MANUFACTURING AND SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A73E0A9B239EF4F6FB33
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WAID, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 COURT OF PALMS
 402
 City FORT MYERS State FL Zip Code 33908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST FLOOD BARRIERS Occupation (for Individual) MANUFACTURING AND SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021
Transaction ID : A68F2961EFCF348BEA55
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WAID, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 COURT OF PALMS
 402
 City FORT MYERS State FL Zip Code 33908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST FLOOD BARRIERS Occupation (for Individual) MANUFACTURING AND SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : AE0E1AF2231094EED9AC
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2141 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WAID, EVERETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11600 COURT OF PALMS
 402
 City FORT MYERS State FL Zip Code 33908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEST FLOOD BARRIERS Occupation (for Individual) MANUFACTURING AND SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A0FE1E740F6674CF7A74
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WALDMAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 167 SHAW DRIVE
 City ACWORTH State GA Zip Code 30102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) LANDLORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : ADA2164EEA0664D02943
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WALKER, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7921 OAK ST.
 City ARVADA State CO Zip Code 80005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A33C7F5A6C2E249C98C1
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2142 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WALKER, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6076 E BEVERLY ST
 City TUCSON State AZ Zip Code 85711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00

Date of Receipt **04 / 16 / 2021**
Transaction ID : A53E1E979CA664DA481C
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WALKER, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6076 E BEVERLY ST
 City TUCSON State AZ Zip Code 85711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : AAAE3DB8CA33E4C9AB9F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WALKER, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6076 E BEVERLY ST
 City TUCSON State AZ Zip Code 85711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 16 / 2021**
Transaction ID : ABC8B0EBE659B43ADACC
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2143 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WALKER, KEVIN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 NECTAR ST
 City RENO State NV Zip Code 89506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 25 / 2021
Transaction ID : A22967C71AD494710BA6
 Amount of Each Receipt this Period 10.00
 Memo Item

B. WALKER, KEVIN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 NECTAR ST
 City RENO State NV Zip Code 89506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A343E3224DE454F0BBA4
 Amount of Each Receipt this Period 20.00
 Memo Item

C. WALKER, KEVIN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 NECTAR ST
 City RENO State NV Zip Code 89506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A640DB12912824CED96E
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2144 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WALLACE, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9275 WOOLSEY RD
 City OLIVE BRANCH State MS Zip Code 38654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 08 / 2021
Transaction ID : ACA9ACDEE7BAD446FB9
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WALLACE, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9275 WOOLSEY RD
 City OLIVE BRANCH State MS Zip Code 38654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A4EF0F775EE364DCABE9
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WALLEN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11016 BLUE ROAN RD
 City OAKTON State VA Zip Code 22124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 227.50

Date of Receipt 06 / 14 / 2021
Transaction ID : A6C83DEBEF00D41CBB0B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2145 OF 3012
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WALLIS, DEBBIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3722 BELLE GROCE LANE

City SUGAR LAND	State TX	Zip Code 77496
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FARMER COPPER	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
06 / 04 / 2021
Transaction ID : AB0DBFB75433648D39E6

Amount of Each Receipt this Period
35.00

Memo Item

B. WALSH, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 VIEWRIDGE AVE
210

City SAN DIEGO	State CA	Zip Code 92123
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALSH ENGINEERS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 23 / 2021
Transaction ID : A5A922C95113C4F7D9FE

Amount of Each Receipt this Period
50.00

Memo Item

C. WALSH, EUGENE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 VIEWRIDGE AVE
210

City SAN DIEGO	State CA	Zip Code 92123
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALSH ENGINEERS	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 23 / 2021
Transaction ID : A424B9AC90037431794E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

135.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2146 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WANG, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19W150 MALLARD CT.
 City DOWNERS GROVE State IL Zip Code 60516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.50

Date of Receipt 06 / 03 / 2021
Transaction ID : AAAE1EABF2C6F4FC1BEI
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WARD, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9831 DEL WEBB PKWY 4304
 City JACKSONVILLE State FL Zip Code 32256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2021
Transaction ID : A784A638FF31A44DF8F4
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WARD, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9831 DEL WEBB PKWY 4304
 City JACKSONVILLE State FL Zip Code 32256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
Transaction ID : A3FE6898EC98E4BFD89C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2147 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WARD, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18830 WINDWARD LN
 City HOUSTON State TX Zip Code 77058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **TECHEMET** Occupation (for Individual) **WELDER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 15 / 2021**
Transaction ID : AF8239B99206543C6921
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WARD, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 WOODLAND DRIVE
 City BRIDGEWATER State MA Zip Code 02324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF** Occupation (for Individual) **ATTORNEY**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 14 / 2021**
Transaction ID : A274B8BD7E8E04B4BAE2
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WARD, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 WOODLAND DRIVE
 City BRIDGEWATER State MA Zip Code 02324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF** Occupation (for Individual) **ATTORNEY**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : A8BBA0DB414F84A6E832
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2148 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WARME, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 356 EAST CARLISLE RD.
 City WESTLAKE VILLAGE State CA Zip Code 91361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 14 / 2021**
Transaction ID : AD94A2C6DECB64DD6B3I
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WARNER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 KRESS FARM RS
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 28 / 2021**
Transaction ID : A9BC1730019C74CF68ED
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WARNER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 KRESS FARM RS
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **03 / 03 / 2021**
Transaction ID : AA15B0EF249EB41CA9AA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2149 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WARNER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 KRESS FARM RS
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : A22EE03DE0F7446E3A29
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WARNER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 KRESS FARM RS
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : A714136A6B6FB4242A67
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WARNER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 KRESS FARM RS
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A451C5B675BE848419CD
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2150 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WARNER, BRADFORD, , ,

Mailing Address 19 KRESS FARM RS

City HINGHAM	State MA	Zip Code 02043
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021

Transaction ID : AF47A92916EFB479196F

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WARNER, BRADFORD, , ,

Mailing Address 19 KRESS FARM RS

City HINGHAM	State MA	Zip Code 02043
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021

Transaction ID : A633E9395C6094498923

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WARNER, BRADFORD, , ,

Mailing Address 19 KRESS FARM RS

City HINGHAM	State MA	Zip Code 02043
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021

Transaction ID : AFFB298BEA12D4D778FC

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2151 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WARNER, BRADFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 KRESS FARM RS
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A71180C20AFEA41F5984
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WARREN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32561 W 172ND STREET
 City GARDNER State KS Zip Code 66030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPFIELD FOODS Occupation (for Individual) MECHANIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A4FD16C0CF2804620971
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WASHBURN, BRENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 DAWES ROAD
 City DOVER FOXCROFT State ME Zip Code 04426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A344034E533304D4DBEF
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2152 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WASMER, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : AEF2D0263B4364064B50
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WASMER, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 31 / 2021**
Transaction ID : A73FE3E080FCF4DDABFA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WASMER, PEDRO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **06 / 30 / 2021**
Transaction ID : A83494BF535C346A0AEE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2153 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WATERS, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 283 HARVEST DR
 City ROCHESTER State NY Zip Code 14626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONROE BOCEES #1 Occupation (for Individual) SIGN SKILLS COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A52D0299A566342658F6
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. WATERS, CHERYL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 283 HARVEST DR
 City ROCHESTER State NY Zip Code 14626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONROE BOCEES #1 Occupation (for Individual) SIGN SKILLS COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2021
Transaction ID : AD5E10E077B8D4A4EB54
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. WATKINS, MARTHA, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 LAKEVIEW RD
 City GRAYSON State GA Zip Code 30017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CADENCE BANK NA Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021
Transaction ID : AC43770159EB44E1CBF0
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2154 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WATKINS, MARTHA, SUE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1409 LAKEVIEW RD
 City GRAYSON State GA Zip Code 30017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CADENCE BANK NA Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2021
Transaction ID : AC300CEF8E27B4832BD0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WATKINS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 686 EL RANCH RD
 City SANTA BARBARA State CA Zip Code 93108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 11 / 2021
Transaction ID : AF5B1436661A74FC8807
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WATTS, MARY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 WATTS DR
 City NEWTON State AL Zip Code 36352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2021
Transaction ID : AADE37C0335C94857B41
 Amount of Each Receipt this Period 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2155 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WATTS, MARY, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 WATTS DR
 City NEWTON State AL Zip Code 36352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 04 / 29 / 2021
Transaction ID : AE67BEAB085B0466689E
 Amount of Each Receipt this Period 65.00
 Memo Item

B. WEAVER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 FRIENDSHIP RD
 City FRIENDSHIP State MD Zip Code 20758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER BOATWORKS Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 19 / 2021
Transaction ID : AD64BC0C5B1C94E72ABC
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WEAVER, JAMES, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8069 COUNTY HIGHWAY 55
 City UPPER SANDUSKY State OH Zip Code 43351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 11 / 2021
Transaction ID : A9A7B3A1D04F143FEAD1
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	415.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2156 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEAVER, JAMES, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8069 COUNTY HIGHWAY 55
 City UPPER SANDUSKY State OH Zip Code 43351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 11 / 2021**
Transaction ID : A97D18769BAA1440D90C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WEAVER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 FRIENDSHIP RD
 City FRIENDSHIP State MD Zip Code 20758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER BOATWORKS Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 19 / 2021**
Transaction ID : A72B0D0C225A641DEB23
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WEAVER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 FRIENDSHIP RD
 City FRIENDSHIP State MD Zip Code 20758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER BOATWORKS Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 19 / 2021**
Transaction ID : A3D67414A1CC84586A0C
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2157 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEAVER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 FRIENDSHIP RD
 City FRIENDSHIP State MD Zip Code 20758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER BOATWORKS Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : AF38BB3848F414715B6B
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. WEAVER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 FRIENDSHIP RD
 City FRIENDSHIP State MD Zip Code 20758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER BOATWORKS Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A3D0E4640C85B4389B43
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. WEAVER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 FRIENDSHIP RD
 City FRIENDSHIP State MD Zip Code 20758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEAVER BOATWORKS Occupation (for Individual) CORP EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A7DB18E107A0443899E7
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2158 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEBB, JAMES, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1457 E DESERT SUN CIR

City DRAPER	State UT	Zip Code 84020
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKWELL AUTOMATION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

Transaction ID : A7C6858B6F0934B67A35

Amount of Each Receipt this Period
100.00

Memo Item

B. WEBB, JAMES, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1457 E DESERT SUN CIR

City DRAPER	State UT	Zip Code 84020
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKWELL AUTOMATION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2021

Transaction ID : A757AE7A65E60475D9C8

Amount of Each Receipt this Period
50.00

Memo Item

C. WEBB, JAMES, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1457 E DESERT SUN CIR

City DRAPER	State UT	Zip Code 84020
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKWELL AUTOMATION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2021

Transaction ID : A03FC4A587C784EB9976

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2159 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEBB, JAMES, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1457 E DESERT SUN CIR
 City DRAPER State UT Zip Code 84020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROCKWELL AUTOMATION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 12 / 2021**
Transaction ID : A9E9C239484684FB7AA6
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WEBB, JAMES, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1457 E DESERT SUN CIR
 City DRAPER State UT Zip Code 84020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROCKWELL AUTOMATION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : AA56A21B2722948E9945
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WEBB, JAMES, , , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1457 E DESERT SUN CIR
 City DRAPER State UT Zip Code 84020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROCKWELL AUTOMATION Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt **04 / 23 / 2021**
Transaction ID : A1CD116269B6B45E6888
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2160 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEBB, JAMES, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1457 E DESERT SUN CIR

City DRAPER	State UT	Zip Code 84020
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKWELL AUTOMATION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2021

Transaction ID : A271300CB64C24117909

Amount of Each Receipt this Period
50.00

Memo Item

B. WEBB, JAMES, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1457 E DESERT SUN CIR

City DRAPER	State UT	Zip Code 84020
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKWELL AUTOMATION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : A2E2FCC27140F486CA3D

Amount of Each Receipt this Period
100.00

Memo Item

C. WEBB, JAMES, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1457 E DESERT SUN CIR

City DRAPER	State UT	Zip Code 84020
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKWELL AUTOMATION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
810.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2021

Transaction ID : A593E4CB2607443BEB78

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2161 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEBB, JAMES, , , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1457 E DESERT SUN CIR

City DRAPER	State UT	Zip Code 84020
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROCKWELL AUTOMATION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
910.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : AE9BCB28398304D7D911

Amount of Each Receipt this Period
100.00

Memo Item

B. WEBB, LOIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5499 TRUSCOTT DR.

City IDAHO FALLS	State ID	Zip Code 83404
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2021

Transaction ID : ACB69A116D8984C60A7F

Amount of Each Receipt this Period
75.00

Memo Item

C. WEBER, MIKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 461 ANTONIO MARTINEZ

City SEALY	State TX	Zip Code 77474
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2021

Transaction ID : AE42536D99FCC4895B6C

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2162 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEBER, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 461 ANTONIO MARTINEZ

City SEALY	State TX	Zip Code 77474
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2021

Transaction ID : AF0C4C88ADA484964B0F

Amount of Each Receipt this Period
100.00

Memo Item

B. WEBER, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 461 ANTONIO MARTINEZ

City SEALY	State TX	Zip Code 77474
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2021

Transaction ID : A481F4EB46A754ABDADC

Amount of Each Receipt this Period
100.00

Memo Item

C. WEBER, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 461 ANTONIO MARTINEZ

City SEALY	State TX	Zip Code 77474
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2021

Transaction ID : A5A65CFBBC37440DE895

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2163 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WEHNER, RICHARD, , ,

Mailing Address 871 MCLEAN AVE

City YONKERS	State NY	Zip Code 10704-4132
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICHARD WEHNER ELECTRICAL CONT CORP	Occupation (for Individual) ELECTRIC CONTRACTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2021

Transaction ID : A8C26C3B2136F42D2A21

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WEHNER, RICHARD, , ,

Mailing Address 871 MCLEAN AVE

City YONKERS	State NY	Zip Code 10704-4132
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICHARD WEHNER ELECTRICAL CONT CORP	Occupation (for Individual) ELECTRIC CONTRACTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2021

Transaction ID : A28E8614E47DB431DAE5

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WEHNER, RICHARD, , ,

Mailing Address 871 MCLEAN AVE

City YONKERS	State NY	Zip Code 10704-4132
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RICHARD WEHNER ELECTRICAL CONT CORP	Occupation (for Individual) ELECTRIC CONTRACTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2021

Transaction ID : ACA5C23F189474BCBA2D

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2164 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEHNER, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 871 MCLEAN AVE
 City YONKERS State NY Zip Code 10704-4132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RICHARD WEHNER ELECTRICAL CONT CORP Occupation (for Individual) ELECTRIC CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A9BA3EE67D53B4DEBB47
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WEHRLE, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 E VIEW ST
 City LOMBARD State IL Zip Code 60148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEHRLE INSURANCE NETWORK Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 13 / 2021
Transaction ID : A2C11370934D8477DBEF
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WEHRLE, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 E VIEW ST
 City LOMBARD State IL Zip Code 60148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEHRLE INSURANCE NETWORK Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A235B2C45E12048AFBA2
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2165 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEHRLE, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 E VIEW ST
 City LOMBARD State IL Zip Code 60148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEHRLE INSURANCE NETWORK Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AF960503976AD4F5E8C0
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WEIL, HENRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 724 GOLF VIEW DRIVE
 City CROZET State VA Zip Code 22932-1536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 23 / 2021
Transaction ID : AF9EF7DA3D1FD4BFDB3F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WEIPERT, MARCUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1480 S. JAY ST
 City LAKEWOOD State CO Zip Code 80232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LITTLETON HOUSING AUTHORITY Occupation (for Individual) MAINTENANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 04 / 2021
Transaction ID : AF24978CE17EE4F32928
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2166 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEISENBURGER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 CHADWICK CT.
 City MOUNT PLEASANT State MI Zip Code 48858
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) GENERAL AGENCY CO. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2021
Transaction ID : A376D3A70E9184D60874
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WEISENBURGER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 CHADWICK CT.
 City MOUNT PLEASANT State MI Zip Code 48858
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) GENERAL AGENCY CO. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 08 / 2021
Transaction ID : AEF06ABC2D69B4F4E93D
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WEISENBURGER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 CHADWICK CT.
 City MOUNT PLEASANT State MI Zip Code 48858
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) GENERAL AGENCY CO. Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2021
Transaction ID : AC8226B96FCD34832AF0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2167 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WELCH-FALZONE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61-25 FLUSHING AVE
 APT. #3R
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 13 / 2021
Transaction ID : A6C726048C76D43D4B4B
 Amount of Each Receipt this Period 500.00
 Memo Item

B. WELCH-FALZONE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61-25 FLUSHING AVE
 APT. #3R
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 14 / 2021
Transaction ID : AEB63DAC589C04580841
 Amount of Each Receipt this Period 500.00
 Memo Item

C. WELCH-FALZONE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61-25 FLUSHING AVE
 APT. #3R
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 13 / 2021
Transaction ID : A25F9A12C3DB744FE9BC
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2168 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WELCH-FALZONE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61-25 FLUSHING AVE
 APT. #3R
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **03 / 13 / 2021**
Transaction ID : AFFC7A7EB840F4E7EB24
 Amount of Each Receipt this Period 500.00
 Memo Item

B. WELCH-FALZONE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61-25 FLUSHING AVE
 APT. #3R
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **04 / 13 / 2021**
Transaction ID : AF3F02D7AC1B04CC590F
 Amount of Each Receipt this Period 500.00
 Memo Item

C. WELCH-FALZONE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61-25 FLUSHING AVE
 APT. #3R
 City MASPETH State NY Zip Code 11378
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **05 / 13 / 2021**
Transaction ID : AC4E7740040784026AF8
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2169 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WELCH-FALZONE, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61-25 FLUSHING AVE
 APT. #3R

City MASPETH	State NY	Zip Code 11378
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 06 / 13 / 2021
Transaction ID : AF66AA751ED424378A8F

Amount of Each Receipt this Period
 500.00

Memo Item

B. WELCH, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 KIMBERLEY DRIVE

City LAUREL	State MS	Zip Code 39440
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED: NUTRITIONAL SERVICES CO	Occupation (for Individual) OWNER/CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 15 / 2021
Transaction ID : A3A99A6F1ED1044FEAD2

Amount of Each Receipt this Period
 50.00

Memo Item

C. WELCH, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 KIMBERLEY DRIVE

City LAUREL	State MS	Zip Code 39440
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED: NUTRITIONAL SERVICES CO	Occupation (for Individual) OWNER/CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 06 / 15 / 2021
Transaction ID : A1ED74EE13DDA4A06889

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2170 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WELLBORN, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3440 LAUREL GREEN CT
 City KENNESAW State GA Zip Code 30144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A251B80F9FF724505BCA
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WELLBORN, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3440 LAUREL GREEN CT
 City KENNESAW State GA Zip Code 30144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **06 / 03 / 2021**
Transaction ID : AD6E0694984C141F095F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WELLS, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5890 N ECHO CANYON LANE
 City PHOENIX State AZ Zip Code 85018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 02 / 2021**
Transaction ID : AE31EC1431CBD4613AF4
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2171 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WENTWORTH, LLOYD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 JACOB LANE
 City PRESCOTT State AZ Zip Code 86303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 17 / 2021
Transaction ID : A4DE7D5F31A814620897
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WERME, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8558 KATY FRWY 118
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MARKETING PRODUCTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 01 / 2021
Transaction ID : AE6D5FC4ED74940529B2
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WESSELS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5062 HEATHER GLEN LANE
 City CONCORD State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCORD SHEET METAL Occupation (for Individual) GM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 18 / 2021
Transaction ID : AEEFDEA1071AB49C49A9
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2172 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESSELS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5062 HEATHER GLEN LANE
 City CONCORD State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCORD SHEET METAL Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **04 / 03 / 2021**
Transaction ID : A79ABFA842E1940908A8
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WESSELS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5062 HEATHER GLEN LANE
 City CONCORD State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCORD SHEET METAL Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 18 / 2021**
Transaction ID : ACC9495B2D9754839A45
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WESSELS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5062 HEATHER GLEN LANE
 City CONCORD State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCORD SHEET METAL Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : A5ECEf35507B24F26ADC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2173 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESSELS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5062 HEATHER GLEN LANE
 City CONCORD State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCORD SHEET METAL Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A690E5EDD7E694538AE2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WESSELS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5062 HEATHER GLEN LANE
 City CONCORD State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCORD SHEET METAL Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A67B7F23A310E4C778C5
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WESSELS, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5062 HEATHER GLEN LANE
 City CONCORD State CA Zip Code 94521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCORD SHEET METAL Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 18 / 2021
Transaction ID : A6463E70A35A54769BC5
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2174 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESSON, CAROL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 BUTLER RD
 City MONSON State MA Zip Code 01057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : ABAA7F269ED70409DAAC
 Amount of Each Receipt this Period 200.00
 Memo Item

B. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt **02 / 08 / 2021**
Transaction ID : A0AC7F023E1114FD48A1
 Amount of Each Receipt this Period 75.00
 Memo Item

C. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **03 / 07 / 2021**
Transaction ID : A8B443FBC54A143EABAE
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2175 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2021
Transaction ID : A597A88882C394220B94
 Amount of Each Receipt this Period 75.00
 Memo Item

B. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2021
Transaction ID : ADFF0616E0ECD49E9AF9
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2021
Transaction ID : A90CE9D3A7B4F456DB1B
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2176 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 05 / 07 / 2021
Transaction ID : A04FBBB63D40C4887B19
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A2E7EAC6FFF3146D9866
 Amount of Each Receipt this Period 75.00
 Memo Item

C. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A478615C5326B44C5A13
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2177 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESTBROOK, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9311 N. 139TH. E AVE
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 06 / 08 / 2021
Transaction ID : A237F164B76F34B6FA0F
 Amount of Each Receipt this Period 75.00
 Memo Item

B. WESTERBURGER, DERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 672 VERONA PACE
 City WESTON State FL Zip Code 33326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MD HEALTHCARE NETWORK Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A21B27A87E60045939E4
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WESTERBURGER, DERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 672 VERONA PACE
 City WESTON State FL Zip Code 33326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MD HEALTHCARE NETWORK Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 15 / 2021
Transaction ID : ABDFF21C0A772483B8B0
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2178 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESTERBURGER, DERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 672 VERONA PACE
 City WESTON State FL Zip Code 33326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MD HEALTHCARE NETWORK Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2021
Transaction ID : AAA239E0C8C32457D96F
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WESTERBURGER, DERWIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 672 VERONA PACE
 City WESTON State FL Zip Code 33326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MD HEALTHCARE NETWORK Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A48AECAP6581642AEA79
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WESTFALL, GEOFFREY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80 ROBBINS RD
 City BROOKLYN State CT Zip Code 06234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : AECE9609EBDBB457A866
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2179 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WESTMORELAND, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 DANCING SKY TRAIL
 City MESQUITE State NV Zip Code 89027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 06 / 15 / 2021
Transaction ID : A79875EF85C9C4691B89
 Amount of Each Receipt this Period 15.00
 Memo Item

B. WESTOVER, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 NORTH ST. 22
 City MEDINA State NY Zip Code 14103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 29 / 2021
Transaction ID : ABA830C55620041CD90F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WETTSTEIN, WENDELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2180 SUNRIDGE CIRCLE
 City RIVERSIDE State CA Zip Code 92503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2021
Transaction ID : A7502098E7ECA4532994
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2180 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WETTSTEIN, WENDELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2180 SUNRIDGE CIRCLE
 City RIVERSIDE State CA Zip Code 92503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 20 / 2021
Transaction ID : AEC2E15E3E0D64CA08E6
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WETZEL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 RIDGEVIEW WAY
 City SIOUX FALLS State SD Zip Code 57105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 24 / 2021
Transaction ID : AA633A62085E64C6D9CA
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WHALING, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10321 CRESTMOOR DRIVE
 City SILVER SPRING State MD Zip Code 20901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SYNTHESIS PARTNERS Occupation (for Individual) RESEARCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 17 / 2021
Transaction ID : A329EAEFB5FAB49568B2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2181 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WHATLEY, DANNY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 ALDRIDGE RD
 City CORTEZ State CO Zip Code 81321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SHEET METAL HVAC OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 10 / 2021
Transaction ID : AE4ECB5256BB84F35B16
 Amount of Each Receipt this Period 300.00
 Memo Item

B. WHATLEY, DANNY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 ALDRIDGE RD
 City CORTEZ State CO Zip Code 81321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SHEET METAL HVAC OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 16 / 2021
Transaction ID : AC49CAC4A339D4F4B87A
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WHATLEY, DANNY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1806 ALDRIDGE RD
 City CORTEZ State CO Zip Code 81321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SHEET METAL HVAC OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A3A409CBD80FB4FD59D7
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2182 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WHEATLEY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 CIRCLE DR
 City REINHOLDS State PA Zip Code 17569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021
Transaction ID : A0CE67C2DAA724D3381D
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. WHEATLEY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 CIRCLE DR
 City REINHOLDS State PA Zip Code 17569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2021
Transaction ID : AC061393F96044B5BA94
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. WHITEHEAD, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19935 CONRAD COURT
 City CASTRO VALLEY State CA Zip Code 94546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : AAD1ECB1104A643F09AD
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2183 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WHITE, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2622 HORSESHOE COVE RD

City WAVERLY	State GA	Zip Code 31565
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEORGIA TRANSMISSION CORP	Occupation (for Individual) INSPECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A2D838DE38D0D4E188A2

Amount of Each Receipt this Period
50.00

Memo Item

B. WHITE, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2622 HORSESHOE COVE RD

City WAVERLY	State GA	Zip Code 31565
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GEORGIA TRANSMISSION CORP	Occupation (for Individual) INSPECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : ADD46A4CB5BCA4ADC8E1

Amount of Each Receipt this Period
50.00

Memo Item

C. WHITE, LETITIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1112 BERING. DRIVE
55

City HOUSTON	State TX	Zip Code 77057
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

Transaction ID : A4167AA93867841AFBB3

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2184 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2021
Transaction ID : A55DF76247D9540DDA9E
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : A32A25DFACB97458DBBA
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2021
Transaction ID : A70766AF969D24EDB8CF
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2185 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A137B39BAB39847B8ABE
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2021
Transaction ID : AFAEEDF2790AA4BE49FC
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : AB7C36DF9B37D4DCCB3F
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2186 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 06 / 01 / 2021
Transaction ID : AD8577BD36FA2480A873
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. WHITE, LETITIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 BERING. DRIVE
 55
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 06 / 30 / 2021
Transaction ID : A6D97083C93A14FC89CC
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. WHITE, MONIQUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1421 NORMAN HILL LANE
 City LEAGUE CITY State TX Zip Code 77573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 15 / 2021
Transaction ID : AB3A883F284524601BE5
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2187 OF 3012
	(check only one)	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WICKMAN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15572 GULF BLVD

City SAINT PETERSBURG	State FL	Zip Code 33708
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A80DEF9298B044486A1F

Amount of Each Receipt this Period
 50.00

Memo Item

B. WICKMAN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15572 GULF BLVD

City SAINT PETERSBURG	State FL	Zip Code 33708
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A97012BD82FC64489B95E

Amount of Each Receipt this Period
 50.00

Memo Item

C. WIEBE, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 36

City LORETTO	State MN	Zip Code 55357
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) AUTOMOTIVE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : A269F3E679FDD4D91AF1

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2188 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIEBE, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 36
 City LORETTO State MN Zip Code 55357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) AUTOMOTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2021
Transaction ID : A9C781062A8904B798C1
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. WIEBE, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 36
 City LORETTO State MN Zip Code 55357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) AUTOMOTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2021
Transaction ID : AC07E3E5D2D4B496B809
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. WIEBE, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 36
 City LORETTO State MN Zip Code 55357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) AUTOMOTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021
Transaction ID : A421DE113575D4132BD8
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2189 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIEBE, THERESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 36

City LORETTO	State MN	Zip Code 55357
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) AUTOMOTIVE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2021

Transaction ID : A6BB9A07D2D6B4A9C824

Amount of Each Receipt this Period
50.00

Memo Item

B. WIEBE, THERESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 36

City LORETTO	State MN	Zip Code 55357
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) AUTOMOTIVE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2021

Transaction ID : A3BE8A44BC04B46FDA58

Amount of Each Receipt this Period
50.00

Memo Item

C. WIEBE, THERESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 36

City LORETTO	State MN	Zip Code 55357
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) AUTOMOTIVE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2021

Transaction ID : AC25C4BBE7B174E0EACC

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2190 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIEBE, THERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 36
 City LORETTO State MN Zip Code 55357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) AUTOMOTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 29 / 2021
Transaction ID : ABCB428C456944355B69
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WILDMAN, DONAHUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5955 CHAMBERY CIRCLE
 City RENO State NV Zip Code 89511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A2E68809A8C754B5AAD3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WILDMAN, DONAHUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5955 CHAMBERY CIRCLE
 City RENO State NV Zip Code 89511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 09 / 2021
Transaction ID : ABF3D37FB9DD24B55A73
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2191 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILEY, BIRNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1112 S GREEN
 City LONGVIEW State TX Zip Code 75602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 20 / 2021
Transaction ID : AB075D555F21D425A9A9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WILHELM, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N23 N27283 ARLINGTON CT.
 City PEWAUKEE State WI Zip Code 53072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 02 / 2021
Transaction ID : AFF48D6F27CF24E61A4F
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WILHELM, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N23 N27283 ARLINGTON CT.
 City PEWAUKEE State WI Zip Code 53072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 06 / 02 / 2021
Transaction ID : A6858A98524F4401A994
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2192 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILKINSON, WILFRID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 CLAREMONT LANE
 327
 City CROZET State VA Zip Code 22932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A8F87A481C5A345AB9C5
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WILLEFORD, TERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13802 WILDSTONE CIRCLE
 City SAN ANTONIO State TX Zip Code 78232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2021
Transaction ID : A75C8FD8FB2F64B3E8D1
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WILLEFORD, TERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13802 WILDSTONE CIRCLE
 City SAN ANTONIO State TX Zip Code 78232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 09 / 2021
Transaction ID : A28B3D04E454D4BC4838
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2193 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLEFORD, TERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13802 WILDSTONE CIRCLE
 City SAN ANTONIO State TX Zip Code 78232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 09 / 2021
Transaction ID : A2CDB5F9DBB1845FD8E7
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WILLEFORD, TERRI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13802 WILDSTONE CIRCLE
 City SAN ANTONIO State TX Zip Code 78232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 09 / 2021
Transaction ID : A244FC2A44F524D73A94
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WILLENBRING, ALOYS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 556 E BELLWOOD
 City SAINT PAUL State MN Zip Code 55117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A221B512362D34FC293A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2194 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, ANDROMEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8954 WINGED BOURNE
 City CHARLOTTE State NC Zip Code 28210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : A9CD0A21A07454773AE1
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WILLIAMS, ANDROMEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8954 WINGED BOURNE
 City CHARLOTTE State NC Zip Code 28210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : A196981B286954A12A3E
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WILLIAMS, ANDROMEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8954 WINGED BOURNE
 City CHARLOTTE State NC Zip Code 28210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : AD5B6D934409C492181E
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2195 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, ANDROMEDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8954 WINGED BOURNE
 City CHARLOTTE State NC Zip Code 28210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 14 / 2021
Transaction ID : A5276C40E74A742C8961
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WILLIAMS, BLAIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 PLAZA DEL AMO 218
 City TORRANCE State CA Zip Code 90503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A8D3A2C018C44420D9E3
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WILLIAMS, BOB, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6358 LOS ALTOS DR
 City MESQUITE State TX Zip Code 75150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : AB57502A16CEE46F1985
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2196 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, GERALDINE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1248
 City MIAMI State OK Zip Code 74355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 26 / 2021
Transaction ID : ABA9AF074E24F42BA990
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. WILLIAMS, MARCIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40167 E ARIZONA AVE
 City VENNETT State CO Zip Code 80102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 19 / 2021
Transaction ID : AB63E745BE43E478F867
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WILLIAMS, MARCIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40167 E ARIZONA AVE
 City VENNETT State CO Zip Code 80102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 19 / 2021
Transaction ID : AA62F4A07CBF34DD9957
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2197 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, MARCIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40167 E ARIZONA AVE
 City VENNETT State CO Zip Code 80102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AA180E9014B2B4918956
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2021
Transaction ID : A33FCD0F2A5F1446F9ED
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FHHC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 15 / 2021
Transaction ID : A3BA60AA4844A4828B50
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2198 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FHHC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **04 / 02 / 2021**
Transaction ID : ADCF26062032746AAB35
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 11 / 2021**
Transaction ID : A5AE32C4CF164453B87B
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FHHC Occupation (for Individual) NURSE PRACTITIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 15 / 2021**
Transaction ID : A53433586402B4EA9A04
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2199 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A4D5C6079EEAA4892BD1
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A2C2E48ECC4374465A57
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WILLIAMS, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 WILLIAMS DRIVE
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A23897855B6EF4243809
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2200 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4696 FM 535

City CEDAR CREEK	State TX	Zip Code 78612
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2021
Transaction ID : A8461A19E14254AA4892

Amount of Each Receipt this Period
 100.00

Memo Item

B. WILLIAMS, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4696 FM 535

City CEDAR CREEK	State TX	Zip Code 78612
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : AA7EFC078031847ECB66

Amount of Each Receipt this Period
 100.00

Memo Item

C. WILLIAMS, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4696 FM 535

City CEDAR CREEK	State TX	Zip Code 78612
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A9FC1ADD2EF8C4C84B6B

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2201 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4696 FM 535
 City CEDAR CREEK State TX Zip Code 78612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2021
Transaction ID : ACC1B6824A02A436CA40
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WILLIAMS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1891
 City UVALDE State TX Zip Code 78802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) STEEL PIPE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : AC51F30500C56436DB70
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. WILLIAMS, TWYLA, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12815 AMARANTH STREET
 City SAN DIEGO State CA Zip Code 92129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS & ADAMS CONSTRUCTION Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A57CEF75B5206458A903
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2202 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, TWYLA, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12815 AMARANTH STREET
 City SAN DIEGO State CA Zip Code 92129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS & ADAMS CONSTRUCTION Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 22 / 2021**
Transaction ID : AC6EF7A19B3B941ECB0C
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WILLIAMS, TWYLA, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12815 AMARANTH STREET
 City SAN DIEGO State CA Zip Code 92129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS & ADAMS CONSTRUCTION Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 22 / 2021**
Transaction ID : A87175E3A24E1451AAA1
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WILLIAMS, TWYLA, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12815 AMARANTH STREET
 City SAN DIEGO State CA Zip Code 92129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVIS & ADAMS CONSTRUCTION Occupation (for Individual) CONTROLLER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **06 / 22 / 2021**
Transaction ID : AEA574A5EC149431BAB6
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2203 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIS, BILL, , , SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3207 DOUGLAS DR

City MIDLAND	State TX	Zip Code 79701
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2021

Transaction ID : A1751B9BA10744B779CD

Amount of Each Receipt this Period
35.00

Memo Item

B. WILL, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3010 TANGLEWOOD DR

City SPRINGDALE	State AR	Zip Code 72764
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2021

Transaction ID : AAFE9D40EE3A64DA6BCC

Amount of Each Receipt this Period
35.00

Memo Item

C. WILL, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3010 TANGLEWOOD DR

City SPRINGDALE	State AR	Zip Code 72764
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2021

Transaction ID : A0FAA2A0E71B640C7BA3

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2204 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILL, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3010 TANGLEWOOD DR

City SPRINGDALE	State AR	Zip Code 72764
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2021

Transaction ID : A25FF0A1C33964EF0836

Amount of Each Receipt this Period
15.00

Memo Item

B. WILL, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3010 TANGLEWOOD DR

City SPRINGDALE	State AR	Zip Code 72764
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2021

Transaction ID : A3A76A17F8C93419BB92

Amount of Each Receipt this Period
35.00

Memo Item

C. WILL, LISA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3010 TANGLEWOOD DR

City SPRINGDALE	State AR	Zip Code 72764
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2021

Transaction ID : A2176CF9E500243CC997

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2205 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILL, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3010 TANGLEWOOD DR
 City SPRINGDALE State AR Zip Code 72764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A83BFA37764C640E2BDC
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WILLOUGHBY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1798 NORTHWEST 15TH VISTA APT #3
 City BOCA RATON State FL Zip Code 33432-1519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AA1EAF06067A741198D7
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WILLSON, PAUL, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 ACADEMY ST
 City ROCKAWAY State NJ Zip Code 07866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2021
Transaction ID : A284224F6F685499C9BF
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2206 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILSON, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 321 N HIGHWAY ST
 City BROOK State IN Zip Code 47922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILSON FERTILIZER INC Occupation (for Individual) AGRI -BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A1EA1F1E046B64B16857
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. WILSON, ELDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1335 NE 27
 City OKLAHOMA CITY State OK Zip Code 73160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WILSON INSURANCE AGENCY Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A2F0F2F0D9C4543EBB28
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. WILSON, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 SHIRLEY AVE
 City CAPE MAY State NJ Zip Code 08204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MARINE CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : A4185C9BA3CE940D0903
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2207 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2025 WOODALL RODGERS FRW. 23
 City DALLAS State TX Zip Code 75201
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021
Transaction ID : A115C1F54800F4E3A990
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WILSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2025 WOODALL RODGERS FRW. 23
 City DALLAS State TX Zip Code 75201
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2021
Transaction ID : A478442701DC44E08AF2
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WILSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2025 WOODALL RODGERS FRW. 23
 City DALLAS State TX Zip Code 75201
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2021
Transaction ID : A2419EC6DEA914EDA9E1
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2208 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILSON, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2025 WOODALL RODGERS FRW.
 23
 City DALLAS State TX Zip Code 75201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 06 / 14 / 2021
Transaction ID : AAFB11019056D4C538EC
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WILSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2837 SO. WALNUT ST.
 City SPRINGFIELD State IL Zip Code 62704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 06 / 01 / 2021
Transaction ID : A58CD92487A4F4A34A4D
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. WILSON, LESLIE, R., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10365 YORK DR
 City FRISCO State TX Zip Code 75035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 215.00

Date of Receipt
 04 / 15 / 2021
Transaction ID : A6DCAACC406A64930A98
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2209 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILSON, LESLIE, R., MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10365 YORK DR

City FRISCO	State TX	Zip Code 75035
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : A1035F050EABC4021B2D

Amount of Each Receipt this Period
50.00

Memo Item

B. WILSON, LESLIE, R., MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10365 YORK DR

City FRISCO	State TX	Zip Code 75035
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2021

Transaction ID : A8E83F3A804E942D593F

Amount of Each Receipt this Period
50.00

Memo Item

C. WILSON, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 28TH ST CT NW

City BRADENTON	State FL	Zip Code 34205
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A5B392354E1D84638921

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2210 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILSON, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 840

City LITTLE ROCK	State CA	Zip Code 93543
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2021

Transaction ID : A7801FE8FC0EA4EA1A9F

Amount of Each Receipt this Period
100.00

Memo Item

B. WILSON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6390 OLD CHURCH WAY

City REYNOLDSBURG	State OH	Zip Code 43068
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2021

Transaction ID : A91599A6662E44A70AFD

Amount of Each Receipt this Period
25.00

Memo Item

C. WILSON, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6390 OLD CHURCH WAY

City REYNOLDSBURG	State OH	Zip Code 43068
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2021

Transaction ID : AF8D1F8E1E60E4801BAA

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2211 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILSON, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 WESTERN AVENUE
 City TERRACE PARK State OH Zip Code 45174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CINCINNATI INSURANCE COMPANY Occupation (for Individual) UNDERWRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021
Transaction ID : ACD1E5CAF17664C7AB73
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WILSON, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 WESTERN AVENUE
 City TERRACE PARK State OH Zip Code 45174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CINCINNATI INSURANCE COMPANY Occupation (for Individual) UNDERWRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 19 / 2021
Transaction ID : ABAE1B0D0BD7947E5883
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WINKLER, LENNART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 O'BRIEN ST
 City LAKE OSWEGO State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIREFCO Occupation (for Individual) HVAC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 21 / 2021
Transaction ID : A1F010CC148F8495CA6E
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2212 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WINN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1696 QUINCE AVE.
 City BOULDER State CO Zip Code 80304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : A30AB2F55EA0B481B999
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WINSTON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7333 NW 61ST TERR
 City POMPANO BEACH State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2021
Transaction ID : A20FE15C29EDA4F62BC5
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WINSTON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7333 NW 61ST TERR
 City POMPANO BEACH State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 24 / 2021
Transaction ID : AD21CE7F9E5C14A209D5
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2213 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WINSTON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7333 NW 61ST TERR
 City POMPANO BEACH State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2021
Transaction ID : A7D5072E8131F492A8D0
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WINSTON, BOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7333 NW 61ST TERR
 City POMPANO BEACH State FL Zip Code 33067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : A4F8AF7880E7244C8B14
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WINTERS, JEANNIE, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 LAFAYETTE ST
 City COLUSA State CA Zip Code 95932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2021
Transaction ID : AAE82C2C1207749D7B23
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2214 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 16 / 2021
Transaction ID : AF7ED984424154D80A6A
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 05 / 2021
Transaction ID : A388597CC44284FE88A7
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 02 / 07 / 2021
Transaction ID : A24F66DA170924BD4994
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2215 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIRT, CHARLES, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6175 NW 167 ST. G35

City MIAMI	State FL	Zip Code 33015
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHEAST INS CTR INC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2021

Transaction ID : A64909312DC7A48A0BE3

Amount of Each Receipt this Period
50.00

Memo Item

B. WIRT, CHARLES, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6175 NW 167 ST. G35

City MIAMI	State FL	Zip Code 33015
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHEAST INS CTR INC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2021

Transaction ID : A8E3A1134491A4CF68C4

Amount of Each Receipt this Period
100.00

Memo Item

C. WIRT, CHARLES, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6175 NW 167 ST. G35

City MIAMI	State FL	Zip Code 33015
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHEAST INS CTR INC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2021

Transaction ID : AEFD3425267C541CFB54

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2216 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 07 / 2021
Transaction ID : A67051863CC53422D8AE
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 03 / 11 / 2021
Transaction ID : AE29255381EAD4B13BCA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 16 / 2021
Transaction ID : AA9F08858FBC241CEA80
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2217 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 05 / 2021
Transaction ID : A4058EE7077FD417B94F
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 04 / 07 / 2021
Transaction ID : A1A500D9B47394810B55
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 04 / 11 / 2021
Transaction ID : A0BA6403151994D6BBB0
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2218 OF 3012
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIRT, CHARLES, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6175 NW 167 ST. G35

City MIAMI	State FL	Zip Code 33015
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHEAST INS CTR INC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021

Transaction ID : A7D18F41CD9FA4CEA852

Amount of Each Receipt this Period
100.00

Memo Item

B. WIRT, CHARLES, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6175 NW 167 ST. G35

City MIAMI	State FL	Zip Code 33015
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHEAST INS CTR INC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021

Transaction ID : A908DA8E50E7C41D3B7A

Amount of Each Receipt this Period
100.00

Memo Item

C. WIRT, CHARLES, R, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6175 NW 167 ST. G35

City MIAMI	State FL	Zip Code 33015
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHEAST INS CTR INC	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021

Transaction ID : A41A2A69201F74C53B82

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2219 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 05 / 11 / 2021
Transaction ID : A4038DCAD12354528957
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A7276B1160D9545CEB1E
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 06 / 05 / 2021
Transaction ID : AE79BF00C82484BF3A01
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2220 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 06 / 07 / 2021
Transaction ID : A0B2EF95696A74E0D85E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 06 / 11 / 2021
Transaction ID : A3B4A54719CB64CB9A83
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WIRT, CHARLES, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 NW 167 ST. G35
 City MIAMI State FL Zip Code 33015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHEAST INS CTR INC Occupation (for Individual) INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 06 / 16 / 2021
Transaction ID : A9ECD13DB90194008B21
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2221 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WISEMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ARONIMINK DRIVE
 City NEWARK State DE Zip Code 19711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2021
Transaction ID : A823B06C6AF424329861
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. WISEMAN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 ARONIMINK DRIVE
 City NEWARK State DE Zip Code 19711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021
Transaction ID : ABA0B13C0265C4293BF0
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. WITTKE, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 HIGHLAND POINT DR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EYECARE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : A83C469A818A740F391C
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2222 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WITTKÉ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 HIGHLAND POINT DR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EYECARE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.80

Date of Receipt 04 / 18 / 2021
Transaction ID : A93DD47594E2F475EA02
 Amount of Each Receipt this Period 20.20
 Memo Item

B. WITTKÉ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 HIGHLAND POINT DR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EYECARE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.80

Date of Receipt 04 / 26 / 2021
Transaction ID : A3CEAF6FFB4CD4D3CBB1
 Amount of Each Receipt this Period 20.00
 Memo Item

C. WITTKÉ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 HIGHLAND POINT DR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EYECARE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.80

Date of Receipt 05 / 16 / 2021
Transaction ID : A571A84AE8EF949059D1
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2223 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WITTKÉ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 HIGHLAND POINT DR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EYECARE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 05 / 18 / 2021
Transaction ID : A8532BD7737214961B22
 Amount of Each Receipt this Period 20.20
 Memo Item

B. WITTKÉ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 HIGHLAND POINT DR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EYECARE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A1D5A859D8B934D309EF
 Amount of Each Receipt this Period 20.00
 Memo Item

C. WITTKÉ, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 HIGHLAND POINT DR
 City KNOXVILLE State TN Zip Code 37919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EYECARE CENTERS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 06 / 16 / 2021
Transaction ID : ABD85C777D77B41F891C
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2224 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WITTKÉ, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 935 HIGHLAND POINT DR

City KNOXVILLE	State TN	Zip Code 37919
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EYECARE CENTERS	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2021

Transaction ID : A288E710C438C4F1F959

Amount of Each Receipt this Period
20.20

Memo Item

B. WITTKÉ, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 935 HIGHLAND POINT DR

City KNOXVILLE	State TN	Zip Code 37919
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EYECARE CENTERS	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2021

Transaction ID : A01AF5A9ECF0847AE5A

Amount of Each Receipt this Period
20.00

Memo Item

C. WOLFE, WILLIAM, R., MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 368

City GRAND VIEW	State ID	Zip Code 83624
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

Transaction ID : A8D1F17E58B6D4A76B05

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	340.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2225 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOLF, VIVIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 BLUEBONNET TRAIL
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2021
Transaction ID : A712FD3DCC89C4004831
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WOLF, VIVIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 BLUEBONNET TRAIL
 City ARLINGTON State TX Zip Code 76013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A024D62EA7BDE452491C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WOLMARANS, THEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 WINDING LANE
 City SAN ANTONIO State TX Zip Code 78231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHRISTIAN FAMILY CHURCH Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 16 / 2021
Transaction ID : A57DA1B4637D84E44A12
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2226 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOLMARANS, THEO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 WINDING LANE
 City SAN ANTONIO State TX Zip Code 78231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHRISTIAN FAMILY CHURCH Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 16 / 2021
Transaction ID : AB4FE5807AAE14ABDB1E
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WOMACK, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 S MONTREAL AVE
 City DALLAS State TX Zip Code 75208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2021
Transaction ID : A7AAFAEFA8BE6473C80A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WOMACK, DEBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 S MONTREAL AVE
 City DALLAS State TX Zip Code 75208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A75F70914F05646EEB07
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2227 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WONG, FLORENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 SANTA PAULA AVE
 City SUNNYVALE State CA Zip Code 94085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NVIDIA Occupation (for Individual) TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 19 / 2021**
Transaction ID : A0D0E39506C114C42AA4
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WONG, FLORENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 SANTA PAULA AVE
 City SUNNYVALE State CA Zip Code 94085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NVIDIA Occupation (for Individual) TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 19 / 2021**
Transaction ID : AC54F3C97098842D0938
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WONG, FLORENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 SANTA PAULA AVE
 City SUNNYVALE State CA Zip Code 94085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NVIDIA Occupation (for Individual) TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 19 / 2021**
Transaction ID : AFD286C03AF5D42868FB
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2228 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WONG, FLORENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 761 SANTA PAULA AVE
 City SUNNYVALE State CA Zip Code 94085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NVIDIA Occupation (for Individual) TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 19 / 2021
Transaction ID : AD65D0393AFA940AD977
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WONG, KINGSLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 644 TURF CT
 City GRAND PRAIRIE State TX Zip Code 75052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS INSTRUMENTS Occupation (for Individual) ENGINEERING MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 14 / 2021
Transaction ID : A68222D9E24DE49A08D0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WONG, KINGSLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 644 TURF CT
 City GRAND PRAIRIE State TX Zip Code 75052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS INSTRUMENTS Occupation (for Individual) ENGINEERING MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A574CF52344C2471E976
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2229 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WONG, KINGSLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 644 TURF CT
 City GRAND PRAIRIE State TX Zip Code 75052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS INSTRUMENTS Occupation (for Individual) ENGINEERING MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : A9E01D4B06196459F997
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WOOD, CHESTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 267
 City CULLODEN State WV Zip Code 25510-0267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021
Transaction ID : A3BC2B3B2E17042F7848
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WOODEN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 WATERSMEET LANE
 City RALEIGH State NC Zip Code 27614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) URC Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : AFC57B056587545868AE
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2230 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODEN, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1005 WATERSMEET LANE
 City RALEIGH State NC Zip Code 27614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) URC Occupation (for Individual) PASTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2021
Transaction ID : A1D052E8C84C848BDA15
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WOODHOUSE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1464 WEST 900 SOUTH
 City SPANISH FORK State UT Zip Code 84460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2021
Transaction ID : AACFE7EA98B545D396C
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WOODHOUSE, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1464 WEST 900 SOUTH
 City SPANISH FORK State UT Zip Code 84460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A4EE944EA8AC04243B83
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2231 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODS, ELYSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25341 CORTE SOMBRERO
 City MURRIETA State CA Zip Code 92563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **04 / 30 / 2021**
Transaction ID : A3821AD4A89C14E15A67
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WOODS, ELYSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25341 CORTE SOMBRERO
 City MURRIETA State CA Zip Code 92563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 25 / 2021**
Transaction ID : AAB0FBB5208724E03862
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WOODS, ELYSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25341 CORTE SOMBRERO
 City MURRIETA State CA Zip Code 92563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **06 / 25 / 2021**
Transaction ID : AA67BF721F1234BBC8B6
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2232 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODS, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 MARKET AVE
 City RICHMOND State CA Zip Code 94801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREEN PRODUCTS CO Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2021
Transaction ID : A3E6C8DA2F0B641F7A71
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WOODS, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 MARKET AVE
 City RICHMOND State CA Zip Code 94801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREEN PRODUCTS CO Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2021
Transaction ID : A669274A2FF354C1B85D
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WOODS, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 MARKET AVE
 City RICHMOND State CA Zip Code 94801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREEN PRODUCTS CO Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2021
Transaction ID : A45D4FCD7E82F4E6E869
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2233 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODS, GUY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 820 MARKET AVE

City RICHMOND	State CA	Zip Code 94801
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GREEN PRODUCTS CO	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2021

Transaction ID : A28767DD058BA44A1B1C

Amount of Each Receipt this Period
100.00

Memo Item

B. WOODS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7619 PENNYBURN DR

City DALLAS	State TX	Zip Code 75248
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2021

Transaction ID : A5B980314E6E44DF2B64

Amount of Each Receipt this Period
250.00

Memo Item

C. WOODS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7619 PENNYBURN DR

City DALLAS	State TX	Zip Code 75248
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) INVESTMENTS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2021

Transaction ID : AFD417B95024C402A9A7

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2234 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7619 PENNYBURN DR
 City DALLAS State TX Zip Code 75248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 14 / 2021**
Transaction ID : AA3F5675097E048C5839
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WOODS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7619 PENNYBURN DR
 City DALLAS State TX Zip Code 75248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 14 / 2021**
Transaction ID : A3245190A2F844D1BAC4
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WOODS, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5368 BLACK MOSHANNON RD
 City PHILIPSBURG State PA Zip Code 16866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 14 / 2021**
Transaction ID : AFB4F0C6D8B6F42F4BD5
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	535.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2235 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOOD, SUSAN, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15808 62ND PLACE NE
 City KENMORE State WA Zip Code 98028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 25 / 2021**
Transaction ID : A8749D9C5BA0C4D06BA2
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WOODWARD, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7470 EVANS RD
 City GRAND BAY State AL Zip Code 36541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 28 / 2021**
Transaction ID : A8456C9652ED449CF8F9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WOODWARD, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7470 EVANS RD
 City GRAND BAY State AL Zip Code 36541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 28 / 2021**
Transaction ID : A65A69B86D29F43BFA11
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2236 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOOLDRIDGE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3127 CANONERO ST.
 City FORT COLLINS State CO Zip Code 80521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASSURED PARTNERS OF COLORADO Occupation (for Individual) OWNER INSURANCE AGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 14 / 2021
Transaction ID : A6BC77194EEB640B5A95
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WOOLDRIDGE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3127 CANONERO ST.
 City FORT COLLINS State CO Zip Code 80521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASSURED PARTNERS OF COLORADO Occupation (for Individual) OWNER INSURANCE AGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2021
Transaction ID : ABF83411A0D5542F2A0E
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WOOLSEY, W. JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 848 COLLEEN DRIVE
 City CANYON LAKE State TX Zip Code 78133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 28 / 2021
Transaction ID : ACC693827436C41E8B5B
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2237 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOO, PHILO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5485 WOODVIEW DRIVE
 City BLOOMFIELD HILLS State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2021
Transaction ID : A63E342DF2AAA4A288AD
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WOO, PHILO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5485 WOODVIEW DRIVE
 City BLOOMFIELD HILLS State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2021
Transaction ID : AA2B0F94B779C4B9389B
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WORSHAM, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44337 SPINKS FERRY ROAD
 City LEESBURG State VA Zip Code 20176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 29 / 2021
Transaction ID : ABD81F3F44E1D40BDBD5
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2238 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WORSHAM, WILLIAM, , ,

Mailing Address **44337 SPINKS FERRY ROAD**

City LEESBURG	State VA	Zip Code 20176
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
04 / 29 / 2021

Transaction ID : A19BDF39F6AEA4B94895

Amount of Each Receipt this Period
75.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WORSHAM, WILLIAM, , ,

Mailing Address **44337 SPINKS FERRY ROAD**

City LEESBURG	State VA	Zip Code 20176
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
05 / 29 / 2021

Transaction ID : AA9E6F05A178B4BE9906

Amount of Each Receipt this Period
75.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WORSHAM, WILLIAM, , ,

Mailing Address **44337 SPINKS FERRY ROAD**

City LEESBURG	State VA	Zip Code 20176
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
06 / 29 / 2021

Transaction ID : AD4B8BB4A3731491A864

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2239 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WORTHING, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10415 CHURCH ROAD
 City DALLAS State TX Zip Code 75238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CISCO-EAGLE, INC. Occupation (for Individual) ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 26 / 2021
Transaction ID : A1B975852D0784E75AA9
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WORTHING, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10415 CHURCH ROAD
 City DALLAS State TX Zip Code 75238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CISCO-EAGLE, INC. Occupation (for Individual) ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 26 / 2021
Transaction ID : AC8543D17FB914A8C9A6
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WORTHINGTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 LEWISHAM COURT
 City RALEIGH State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 31 / 2021
Transaction ID : AA1F85BA8B64647789F2
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2240 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WORTHINGTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 LEWISHAM COURT
 City RALEIGH State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 31 / 2021
Transaction ID : AF7620E4BAEB54E0EBF9
 Amount of Each Receipt this Period 10.00
 Memo Item

B. WORTHINGTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 LEWISHAM COURT
 City RALEIGH State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 31 / 2021
Transaction ID : A9EB52516EF214A02B8C
 Amount of Each Receipt this Period 10.00
 Memo Item

C. WORTHINGTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 LEWISHAM COURT
 City RALEIGH State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 04 / 08 / 2021
Transaction ID : A0852F26AEA4E4FADA58
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2241 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WORTHINGTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 LEWISHAM COURT
 City RALEIGH State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 08 / 2021
Transaction ID : A9BACCCA5D8E548D282E
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WORTHINGTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 LEWISHAM COURT
 City RALEIGH State NC Zip Code 27612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AC915AB14288E4740B01
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WRANISCHAR, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2716 CHAFFIN LN
 City MAGNOLIA State AR Zip Code 71753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 26 / 2021
Transaction ID : A251604B7BC9A4BCF868
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5070.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2242 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WREIOLE, MELVINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 NOTTINGHAM AVE
 City LITTLE SILVER State NJ Zip Code 07739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2021
Transaction ID : A2861DFA8A5D543E7BB0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WREIOLE, MELVINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 NOTTINGHAM AVE
 City LITTLE SILVER State NJ Zip Code 07739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 27 / 2021
Transaction ID : A510CD534ED3A42CDBAA
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WRIDE, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 322
 City GARFIELD State WA Zip Code 99130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF GARFIELD WA Occupation (for Individual) PUBLIC WORKS DEPT.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A4C8D7072F06644CF8A3
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2243 OF 3012				
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WRIGHT DILLER, EVALYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 CIRCLE DRIVE
 City PANAMA CITY BEACH State FL Zip Code 32413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 17 / 2021**
Transaction ID : A43CAFFC7C5A746608C6
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WRIGHT, ART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 WETHERSFIELD DR
 City FLORENCE State SC Zip Code 29501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 12 / 2021**
Transaction ID : A5231D6B936BC4E68BF0
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WRIGHT, ART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 WETHERSFIELD DR
 City FLORENCE State SC Zip Code 29501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 12 / 2021**
Transaction ID : A784E43E7A6764E6AABA
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2244 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WRIGHT, CARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4069 SHRAYER CT
 City WARRENTON State VA Zip Code 20187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCED ACOUSTIC CONCEPTS Occupation (for Individual) BUYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 06 / 25 / 2021
Transaction ID : AED1537793B514AA1821
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WRIGHT, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 COYLE AVE
 City CARMICHAEL State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONR Occupation (for Individual) CNA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.25

Date of Receipt
 05 / 21 / 2021
Transaction ID : A1BA8678A679D473ADB
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WRIGHT, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 COYLE AVE
 City CARMICHAEL State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONR Occupation (for Individual) CNA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 231.25

Date of Receipt
 06 / 21 / 2021
Transaction ID : A95986642B9D84080A83
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2245 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WRIGHT, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 BEACON RIDGE CIRCLE

City SALEM	State SC	Zip Code 29676
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BFE	Occupation (for Individual) CFP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2021

Transaction ID : A52804EB9615E467FAC2

Amount of Each Receipt this Period
50.00

Memo Item

B. WRIGHT, JESSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 BEACON RIDGE CIRCLE

City SALEM	State SC	Zip Code 29676
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BFE	Occupation (for Individual) CFP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2021

Transaction ID : A71129369CEC54AD0BD6

Amount of Each Receipt this Period
50.00

Memo Item

C. WRIGHT, RUSSELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5440 DURHAM AVENUE

City FORT WORTH	State TX	Zip Code 76114
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2021

Transaction ID : AC975A1203FBC4A9A80E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2246 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WRIGHT, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5440 DURHAM AVENUE
 City FORT WORTH State TX Zip Code 76114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 02 / 2021
Transaction ID : AABE3D0D6BCFB4E17A6
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WUEBBELS, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8783 N ELIZABETH
 City SCALES MOUND State IL Zip Code 61075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 23 / 2021
Transaction ID : A468A0DDA2F154134871
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WUEBBELS, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8783 N ELIZABETH
 City SCALES MOUND State IL Zip Code 61075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 13 / 2021
Transaction ID : A82F8E71D27A44D70B1C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2247 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WUEBBELS, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8783 N ELIZABETH

City SCALES MOUND	State IL	Zip Code 61075
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2021

Transaction ID : AAED77A41A0AE40B989A

Amount of Each Receipt this Period
100.00

Memo Item

B. WUEBBELS, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8783 N ELIZABETH

City SCALES MOUND	State IL	Zip Code 61075
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2021

Transaction ID : A6B20968674C7485A92C

Amount of Each Receipt this Period
50.00

Memo Item

C. WUEBBELS, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8783 N ELIZABETH

City SCALES MOUND	State IL	Zip Code 61075
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2021

Transaction ID : AC48B3A38064F4BB9B9B

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2248 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WUEBBELS, JEAN, , ,

Mailing Address 8783 N ELIZABETH

City SCALES MOUND	State IL	Zip Code 61075
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2021

Transaction ID : AEE96ECC510664977AA3

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WUEBBELS, JEAN, , ,

Mailing Address 8783 N ELIZABETH

City SCALES MOUND	State IL	Zip Code 61075
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2021

Transaction ID : A54E768733A3B44B49A4

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WUEBBELS, JEAN, , ,

Mailing Address 8783 N ELIZABETH

City SCALES MOUND	State IL	Zip Code 61075
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2021

Transaction ID : A7D42D99ECE8B4DAAB0F

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2249 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WUEBBELS, JEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8783 N ELIZABETH

City SCALES MOUND	State IL	Zip Code 61075
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2021

Transaction ID : A131F6F9E92D440F0B90

Amount of Each Receipt this Period
100.00

Memo Item

B. WULFF, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 888 E. CANTERBURY ST.

City SPRINGFIELD	State MO	Zip Code 65810-2865
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2021

Transaction ID : AC2D8006851904575BBD

Amount of Each Receipt this Period
50.00

Memo Item

C. WULFF, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 888 E. CANTERBURY ST.

City SPRINGFIELD	State MO	Zip Code 65810-2865
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2021

Transaction ID : ACA5634A035C54C8996A

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2250 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WYLIE, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 MERIDIAN AVENUE

City MADERA	State CA	Zip Code 93636
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2021

Transaction ID : AB16C578078744E8C9B4

Amount of Each Receipt this Period
35.00

Memo Item

B. WYLIE, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 MERIDIAN AVENUE

City MADERA	State CA	Zip Code 93636
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2021

Transaction ID : A4DA450185D8A408DBE7

Amount of Each Receipt this Period
35.00

Memo Item

C. WYLIE, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 MERIDIAN AVENUE

City MADERA	State CA	Zip Code 93636
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2021

Transaction ID : A92638661F45045F2B82

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2251 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WYLIE, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 MERIDIAN AVENUE
 City MADERA State CA Zip Code 93636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : AA044E1AFECA843E4B19
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. WYLIE, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 MERIDIAN AVENUE
 City MADERA State CA Zip Code 93636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2021
Transaction ID : A0552F632D06E45D5A7E
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. WYLIE, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 MERIDIAN AVENUE
 City MADERA State CA Zip Code 93636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2021
Transaction ID : A26C3D1A37E354C769DC
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶
TOTAL This Period (last page this line number only).....▶

105.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2252 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WYLIE, CHRIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 MERIDIAN AVENUE

City MADERA	State CA	Zip Code 93636
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2021

Transaction ID : A6953FC022F7B4B0B9EC

Amount of Each Receipt this Period
35.00

Memo Item

B. WYLIE, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9053 N WOODROW AVE

City FRESNO	State CA	Zip Code 93720
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCH MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2021

Transaction ID : A1D586971AEFF491B84E

Amount of Each Receipt this Period
50.00

Memo Item

C. WYLIE, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9053 N WOODROW AVE

City FRESNO	State CA	Zip Code 93720
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) RANCH MANAGEMENT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2021

Transaction ID : A093189D61A8C47B199E

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2253 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WYNNS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4830 SUMMERBRIDGE CIR
 City LEESBURG State FL Zip Code 34748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2021
Transaction ID : A977D231EAB6B4BD3B2E
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. WYNNS, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4830 SUMMERBRIDGE CIR
 City LEESBURG State FL Zip Code 34748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2021
Transaction ID : A208123F76AFA4395A38
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. WYSHINSKI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 234 N HOOK ROAD
 City PENNSVILLE State NJ Zip Code 08070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYSHINSKI CONSTRUCTION LLC Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2021
Transaction ID : AC7DB48E79E4341D3B68
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2254 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WYSOCKI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11682 DORADA AVENUE
 City GARDEN GROVE State CA Zip Code 92840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BOEING COMPANY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2021
Transaction ID : A5C316E282CAC443F93A
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WYSOCKI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11682 DORADA AVENUE
 City GARDEN GROVE State CA Zip Code 92840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BOEING COMPANY Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2021
Transaction ID : A973630DCC6864EB38AB
 Amount of Each Receipt this Period 50.00
 Memo Item

C. YACOBI, AVRAHAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 OAK TRAIL RD.
 City ENGLEWOOD State NJ Zip Code 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHARMACEUTICAL SCIENTIFIC ADVI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A4D38EFB0115944B785F
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2255 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YARBROUGH, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12809. HAPPY HILL RD

City DADE CITY	State FL	Zip Code 33525
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORCHBEARERS CHRISTIAN ACADEMY	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2021

Transaction ID : AA69FA92255B34214BBF

Amount of Each Receipt this Period
50.00

Memo Item

B. YARBROUGH, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12809. HAPPY HILL RD

City DADE CITY	State FL	Zip Code 33525
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORCHBEARERS CHRISTIAN ACADEMY	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2021

Transaction ID : A082531E5B8DF49D7BB9

Amount of Each Receipt this Period
35.00

Memo Item

C. YARBROUGH, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12809. HAPPY HILL RD

City DADE CITY	State FL	Zip Code 33525
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORCHBEARERS CHRISTIAN ACADEMY	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2021

Transaction ID : AD00482186C35405C938

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2256 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YARBROUGH, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12809. HAPPY HILL RD

City DADE CITY	State FL	Zip Code 33525
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORCHBEARERS CHRISTIAN ACADEMY	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2021

Transaction ID : A1FAE130A21864AF4950

Amount of Each Receipt this Period
35.00

Memo Item

B. YARBROUGH, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12809. HAPPY HILL RD

City DADE CITY	State FL	Zip Code 33525
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORCHBEARERS CHRISTIAN ACADEMY	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2021

Transaction ID : A63148C0C7A714B8B88E

Amount of Each Receipt this Period
50.00

Memo Item

C. YARBROUGH, JANICE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12809. HAPPY HILL RD

City DADE CITY	State FL	Zip Code 33525
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TORCHBEARERS CHRISTIAN ACADEMY	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2021

Transaction ID : AD3BCB741BE484F55B83

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2257 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YARBROUGH, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12809. HAPPY HILL RD
 City DADE CITY State FL Zip Code 33525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TORCHBEARERS CHRISTIAN ACADEMY Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2021
Transaction ID : A0EF382964E084F038E2
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. YATES, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0203 BRIAR DR
 City HOUSTON State TX Zip Code 77042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2021
Transaction ID : A78585FC27F374F4CA05
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. YODER, ANTHONY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 FRANCES ANDERSON RD
 City JESUP State GA Zip Code 31545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MANUFACTURING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2021
Transaction ID : A7E1E24A1071F4DBDB53
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	160.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2258 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOHE, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5151 W. STATE HWY 29
 City GEORGETOWN State TX Zip Code 78628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 14 / 2021
Transaction ID : AF8A3765993D747FE97B
 Amount of Each Receipt this Period 50.00
 Memo Item

B. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 19 / 2021
Transaction ID : A0E7183A7CA77403B93C
 Amount of Each Receipt this Period 250.00
 Memo Item

C. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 19 / 2021
Transaction ID : A55F44BC5289B4EF293A
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2259 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : A4180234577984E99AC4
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2021
Transaction ID : A2DA9F661A73E410AAB3
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : A4CA0C1C435D4455B8AB
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2260 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 CEDAR POINT DRIVE
 City SAVANNAH State GA Zip Code 31405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A5D24997C65E4412CB57
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. YOUNG, DAVID, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 799
 City SOUTH BEACH State OR Zip Code 97366
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2021
Transaction ID : AA96F9C40D242406492B
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. YOUNG, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4584 TAM O SHANTER
 City THOUSAND OAKS State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2021
Transaction ID : A593FB908FCC146CB92C
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2261 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4584 TAM O SHANTER
 City THOUSAND OAKS State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 15 / 2021
Transaction ID : A8D80ACAC7C054F829B9
 Amount of Each Receipt this Period 35.00
 Memo Item

B. YOUNG, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4584 TAM O SHANTER
 City THOUSAND OAKS State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 19 / 2021
Transaction ID : A47287F0CB9214507A38
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YOUNG, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4584 TAM O SHANTER
 City THOUSAND OAKS State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 05 / 15 / 2021
Transaction ID : AE298FFACB28743BBBEC
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2262 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4584 TAM O SHANTER
 City THOUSAND OAKS State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2021
Transaction ID : AEC535DC620224636AE1
 Amount of Each Receipt this Period 35.00
 Memo Item

B. YOUNG, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4584 TAM O SHANTER
 City THOUSAND OAKS State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2021
Transaction ID : AE62BB8D6D4DD42BAB91
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YOUNG, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4584 TAM O SHANTER
 City THOUSAND OAKS State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2021
Transaction ID : A1C7D435B3FF64E5C8F2
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2263 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18490 ST HWY 305 NE
 City POULSBO State WA Zip Code 98370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2021
Transaction ID : AFE7E0E8951F94C708EE
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. YOUNG, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18490 ST HWY 305 NE
 City POULSBO State WA Zip Code 98370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2021
Transaction ID : A04D832B7044E435C833
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. YOUNG, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18490 ST HWY 305 NE
 City POULSBO State WA Zip Code 98370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2021
Transaction ID : A6C2C0790309E4379B12
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2264 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18490 ST HWY 305 NE
 City POULSBO State WA Zip Code 98370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A6812520D035046C5944
 Amount of Each Receipt this Period 100.00
 Memo Item

B. YOUNG, MARGARET, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 VILLAGE BOULEVARD
 City ROME State GA Zip Code 30161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 04 / 22 / 2021
Transaction ID : ADC47A65666514D64AE4
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YOUNG, MARGARET, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 VILLAGE BOULEVARD
 City ROME State GA Zip Code 30161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2021
Transaction ID : A46E25452F9224C4DB50
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2265 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, MARGARET, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 VILLAGE BOULEVARD
 City ROME State GA Zip Code 30161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 22 / 2021
Transaction ID : A589FE2C6E1C94B2BB24
 Amount of Each Receipt this Period 35.00
 Memo Item

B. YOUNG, MARGARET, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 VILLAGE BOULEVARD
 City ROME State GA Zip Code 30161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2021
Transaction ID : A4920FF4BF12A4638B0F
 Amount of Each Receipt this Period 25.00
 Memo Item

C. YOUNG, MARGARET, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 VILLAGE BOULEVARD
 City ROME State GA Zip Code 30161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 06 / 22 / 2021
Transaction ID : A5B7FD9640E924C6096A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2266 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, MARGARET, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 VILLAGE BOULEVARD
 City ROME State GA Zip Code 30161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A7FCFE606685B4829877
 Amount of Each Receipt this Period 25.00
 Memo Item

B. YOUNG, MEGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40988 BIG OAK WAY
 City OAKHURST State CA Zip Code 93644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCED MEDICAL IMAGING, FRESNO, CA, Occupation (for Individual) REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A5E8E910333EA4F60A6F
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YOUNG, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4129 LESTER DR NE
 City GRAND RAPIDS State MI Zip Code 49525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 02 / 2021
Transaction ID : A89E9BC96682343418E0
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2267 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 648 CLEMENT

City SAN FRANCISCO	State CA	Zip Code 94118-2207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2021

Transaction ID : AB98DB81ABA50464ABF8

Amount of Each Receipt this Period
 35.00

Memo Item

B. YOUNG, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 648 CLEMENT

City SAN FRANCISCO	State CA	Zip Code 94118-2207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2021

Transaction ID : A1A9730F276A348E3873

Amount of Each Receipt this Period
 35.00

Memo Item

C. YOUNG, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 648 CLEMENT

City SAN FRANCISCO	State CA	Zip Code 94118-2207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2021

Transaction ID : AB035856447CF4221881

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2268 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2021
Transaction ID : A1152CD1DC606466AA4D
 Amount of Each Receipt this Period 15.00
 Memo Item

B. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2021
Transaction ID : A60140578A2E046D686A
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2021
Transaction ID : A4B98167485D44658AD7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2269 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 648 CLEMENT

City SAN FRANCISCO	State CA	Zip Code 94118-2207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2021

Transaction ID : A1AA60FAB0C634B5CB41

Amount of Each Receipt this Period
35.00

Memo Item

B. YOUNG, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 648 CLEMENT

City SAN FRANCISCO	State CA	Zip Code 94118-2207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2021

Transaction ID : AE9552658D4224EF7BA2

Amount of Each Receipt this Period
25.00

Memo Item

C. YOUNG, TERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 648 CLEMENT

City SAN FRANCISCO	State CA	Zip Code 94118-2207
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2021

Transaction ID : A6DCD5C26340040039F1

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2270 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **04 / 05 / 2021**
Transaction ID : A3E4B57A4806E4D5291F
 Amount of Each Receipt this Period 35.00
 Memo Item

B. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : AED0EBCC16EDA44889A5
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt **04 / 12 / 2021**
Transaction ID : A7DC252BDC0B74A52BF7
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2271 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2021
Transaction ID : A124B74AC2D3A4AA18F9
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2021
Transaction ID : A354BBB38034643FF9F4
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2021
Transaction ID : A05C5A922F3574343AD1
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2272 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2021
Transaction ID : A6DAB04BD938C4467ACI
 Amount of Each Receipt this Period 35.00
 Memo Item

B. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2021
Transaction ID : A575D97D6A87F408A9A6
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2021
Transaction ID : A0AC25D5B53134CB4819
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2273 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021
Transaction ID : A5F849FFC6E2F44A9833
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. YOUNG, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 CLEMENT
 City SAN FRANCISCO State CA Zip Code 94118-2207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 795.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2021
Transaction ID : A2DDBFCFE0C5BD47F48E0
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. YOUNT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6
 City KNOB NOSTER State MO Zip Code 65336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2021
Transaction ID : AE3B8F833467549C88E2
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2274 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YOUNT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6
 City KNOB NOSTER State MO Zip Code 65336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 12 / 2021
Transaction ID : A2384BA0D3A6E4421B15
 Amount of Each Receipt this Period 100.00
 Memo Item

B. YOUNT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6
 City KNOB NOSTER State MO Zip Code 65336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2021
Transaction ID : AAA8B39EBDC7D4CF8861
 Amount of Each Receipt this Period 100.00
 Memo Item

C. YOUNT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6
 City KNOB NOSTER State MO Zip Code 65336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 12 / 2021
Transaction ID : AE77069FD86CD4E79B43
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2275 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY

City HACIENDA HEIGHTS	State CA	Zip Code 91745
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2021

Transaction ID : A5BB08CBA96A848DBBF5

Amount of Each Receipt this Period
25.00

Memo Item

B. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY

City HACIENDA HEIGHTS	State CA	Zip Code 91745
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2021

Transaction ID : AE34CE83F19C6493991E

Amount of Each Receipt this Period
35.00

Memo Item

C. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY

City HACIENDA HEIGHTS	State CA	Zip Code 91745
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2021

Transaction ID : AE69E1CDB618249B8887

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2276 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **04 / 17 / 2021**
Transaction ID : AE27B248A182045038EB
 Amount of Each Receipt this Period 25.00
 Memo Item

B. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **04 / 26 / 2021**
Transaction ID : AF606D657E9484C8EB55
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt **05 / 03 / 2021**
Transaction ID : AC3D11F7524FB4156879
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2277 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 17 / 2021
Transaction ID : ADBC663A650C34A78A78
 Amount of Each Receipt this Period 25.00
 Memo Item

B. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 26 / 2021
Transaction ID : AA270BD01F2604EB48CD
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 03 / 2021
Transaction ID : A9AE97E6A896340F3871
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2278 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2021
Transaction ID : AEB55958DCDC8480F9A5
 Amount of Each Receipt this Period 25.00
 Memo Item

B. YU, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16617 ECHO HILL WAY
 City HACIENDA HEIGHTS State CA Zip Code 91745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2021
Transaction ID : ACC9A883C0F924ED0B26
 Amount of Each Receipt this Period 35.00
 Memo Item

C. YUNCK, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59122 SE CABIN LN
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2021
Transaction ID : A2CA3C6BBD6C54AFCAA
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 160.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2279 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YUNCK, KENNETH, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59122 SE CABIN LN

City SANDY	State OR	Zip Code 97055
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2021

Transaction ID : A06056269FE0D4CA5BC1

Amount of Each Receipt this Period
100.00

Memo Item

B. YUNCK, KENNETH, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59122 SE CABIN LN

City SANDY	State OR	Zip Code 97055
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2021

Transaction ID : AB2EC82FAF56B4EC2A5C

Amount of Each Receipt this Period
100.00

Memo Item

C. YUNCK, KENNETH, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59122 SE CABIN LN

City SANDY	State OR	Zip Code 97055
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2021

Transaction ID : A01818C5A78E943EFB7C

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2280 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YUNCK, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59122 SE CABIN LN
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2021
Transaction ID : A676E0C9889CC43E4868
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. YUNCK, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59122 SE CABIN LN
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2021
Transaction ID : A2AE8005E11E64785B34
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. YUNCK, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59122 SE CABIN LN
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2021
Transaction ID : A8952A564EA1B4368ABC
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2281 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YUNCK, KENNETH, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 59122 SE CABIN LN
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 835.00

Date of Receipt 06 / 08 / 2021
Transaction ID : AAA2D11FC15BF48A5911
 Amount of Each Receipt this Period 100.00
 Memo Item

B. YUNDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 MERIDIAN RANCH DRIVE SOMERSETT-SIERRA CANYON
 City RENO State NV Zip Code 89523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 29 / 2021
Transaction ID : A54A4B134E7214C808EE
 Amount of Each Receipt this Period 25.00
 Memo Item

C. YUNDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 MERIDIAN RANCH DRIVE SOMERSETT-SIERRA CANYON
 City RENO State NV Zip Code 89523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 23 / 2021
Transaction ID : AD94332158F144F08951
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2282 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YUNDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 MERIDIAN RANCH DRIVE
SOMERSETT-SIERRA CANYON

City RENO	State NV	Zip Code 89523
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2021

Transaction ID : A9DC4D1C386D4402E97A

Amount of Each Receipt this Period
25.00

Memo Item

B. YUNDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 MERIDIAN RANCH DRIVE
SOMERSETT-SIERRA CANYON

City RENO	State NV	Zip Code 89523
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2021

Transaction ID : A0C32AC5A53204335A30

Amount of Each Receipt this Period
50.00

Memo Item

C. YUNDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 MERIDIAN RANCH DRIVE
SOMERSETT-SIERRA CANYON

City RENO	State NV	Zip Code 89523
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2021

Transaction ID : A122604D414CF492B8DF

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2283 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YUNDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 MERIDIAN RANCH DRIVE
SOMERSETT-SIERRA CANYON

City RENO State NV Zip Code 89523

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 06 / 23 / 2021
Transaction ID : A135E94A27B334DF8886

Amount of Each Receipt this Period
 50.00

Memo Item

B. YUNDT, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 MERIDIAN RANCH DRIVE
SOMERSETT-SIERRA CANYON

City RENO State NV Zip Code 89523

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 06 / 29 / 2021
Transaction ID : A19EAE1058E3549BDA67

Amount of Each Receipt this Period
 25.00

Memo Item

C. ZABALLERO, ANGELINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 9TH

City PISCATAWAY State NJ Zip Code 08854

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 06 / 08 / 2021
Transaction ID : AEAFC0FC595D45F7946

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2284 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZAHARIE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3369
 City COEUR D ALENE State ID Zip Code 83816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALPHA SERVICES Occupation (for Individual) GM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2021
Transaction ID : A6239705ECC824DBBA44
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. ZALANE, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12313 S 76 TH AVENUE
 City PALOS HEIGHTS State IL Zip Code 60463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2021
Transaction ID : AC5DD428D0C6E41C9984
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. ZAMANIAN, IRAJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24462 KINGS VIEW
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2021
Transaction ID : A87394E02979443958F6
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2285 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZAMANIAN, IRAJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24462 KINGS VIEW
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2021
Transaction ID : A18A54DB8A6974C62BD1
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ZAMORA, ANGELICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 189
 City PENITAS State TX Zip Code 78576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2021
Transaction ID : A2D562C3A36C240B7A17
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ZAMORA, ANGELICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 189
 City PENITAS State TX Zip Code 78576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : AA4B9B19B8D3146A99D2
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2286 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZAMORA, ANGELICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 189
 City PENITAS State TX Zip Code 78576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2021
Transaction ID : A1A68C5208B3B426BAF3
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. ZAMORA, ANGELICA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 189
 City PENITAS State TX Zip Code 78576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2021
Transaction ID : A3A40F101260C4B8B9E4
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ZANDER, ANNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5115 SUNSET DRIVE
 City KANSAS CITY State MO Zip Code 64112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERUVIAN CONNECTION Occupation (for Individual) CBO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2021
Transaction ID : A285F4107403648EFB66
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2287 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZANDER, ANNIE, , ,

Mailing Address **5115 SUNSET DRIVE**

City **KANSAS CITY** State **MO** Zip Code **64112**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **PERUVIAN CONNECTION** Occupation (for Individual) **CBO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
02 / 02 / 2021

Transaction ID : A856BB94088154369A57

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZANDER, ANNIE, , ,

Mailing Address **5115 SUNSET DRIVE**

City **KANSAS CITY** State **MO** Zip Code **64112**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **PERUVIAN CONNECTION** Occupation (for Individual) **CBO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
03 / 02 / 2021

Transaction ID : AA26A536B2B3A4FAA9FC

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZANDER, ANNIE, , ,

Mailing Address **5115 SUNSET DRIVE**

City **KANSAS CITY** State **MO** Zip Code **64112**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **PERUVIAN CONNECTION** Occupation (for Individual) **CBO**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
04 / 02 / 2021

Transaction ID : A468F64BE44CE48B89C9

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **1500.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2288 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZARNEKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2084 TERRACE DR
 City MOUNDS VIEW State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **03 / 20 / 2021**
Transaction ID : AA5A182FB17464613BE3
 Amount of Each Receipt this Period 40.00
 Memo Item

B. ZARNEKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2084 TERRACE DR
 City MOUNDS VIEW State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : A9726BD9D8D7F40A397D
 Amount of Each Receipt this Period 40.00
 Memo Item

C. ZARNEKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2084 TERRACE DR
 City MOUNDS VIEW State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **04 / 20 / 2021**
Transaction ID : A08163CE8F8074A02AE1
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2289 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZARNEKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2084 TERRACE DR
 City MOUNDS VIEW State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **04 / 21 / 2021**
Transaction ID : A1F19E47A1B2C4BE0AE3
 Amount of Each Receipt this Period 30.00
 Memo Item

B. ZARNEKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2084 TERRACE DR
 City MOUNDS VIEW State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **05 / 20 / 2021**
Transaction ID : A688584F708B54DC1A74
 Amount of Each Receipt this Period 40.00
 Memo Item

C. ZARNEKE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2084 TERRACE DR
 City MOUNDS VIEW State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **06 / 20 / 2021**
Transaction ID : A49887143923946949B8
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2290 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZEISLOFT, CHARLES, D., ,

Mailing Address 1699 CROWN POINT ROAD

City THOROFARE	State NJ	Zip Code 08086
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2021

Transaction ID : A88D99E2485FB4681B5E

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZEISLOFT, CHARLES, D., ,

Mailing Address 1699 CROWN POINT ROAD

City THOROFARE	State NJ	Zip Code 08086
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2021

Transaction ID : A035BA9600C1A44F8A0C

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZEISLOFT, CHARLES, D., ,

Mailing Address 1699 CROWN POINT ROAD

City THOROFARE	State NJ	Zip Code 08086
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2021

Transaction ID : A720B0BE5326742178DE

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2291 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZEISLOFT, CHARLES, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1699 CROWN POINT ROAD
 City THOROFARE State NJ Zip Code 08086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 03 / 2021
Transaction ID : AD8C6DFBD356A43FB9A7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ZHANG, LINGJIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 CRESTWOOD DRIVE
 City MOUNT POCONO State PA Zip Code 18344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN LI INTERNATIONAL INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2021
Transaction ID : A986B0A1B0AD14B12855
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ZHANG, LINGJIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 CRESTWOOD DRIVE
 City MOUNT POCONO State PA Zip Code 18344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN LI INTERNATIONAL INC. Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 15 / 2021
Transaction ID : ADE018C30DB9B463C83C
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2292 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZHANG, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 CRESTWOOD DRIVE
 City MOUNT POCONO State PA Zip Code 18344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHENGYUAN Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2021
Transaction ID : A3638B0BF03C9490F901
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. ZHANG, LYNN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 CRESTWOOD DRIVE
 City MOUNT POCONO State PA Zip Code 18344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHENGYUAN Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2021
Transaction ID : AC06D9D0201C14B85906
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. ZIDWICK, DOROTHY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16205 36TH AVE N APT 233
 City PLYMOUTH State MN Zip Code 55446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2021
Transaction ID : A8EAB4EA4F8014A0AB10
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2293 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZIEGLER, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1772 S. RANDALL RD
 City GENEVA State IL Zip Code 60134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 26 / 2021**
Transaction ID : A92FC49FE815B48B7A4C
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ZIMMERMANN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7380 BISCAYNE QAY SE
 City GRAND RAPIDS State MI Zip Code 49546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt **01 / 30 / 2021**
Transaction ID : A9A6704E9E3DF4CACBB0
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ZIMMERMANN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7380 BISCAYNE QAY SE
 City GRAND RAPIDS State MI Zip Code 49546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **02 / 02 / 2021**
Transaction ID : A57F56E84B8BD492CBDC
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 95.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2294 OF 3012
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZIMMERMANN, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7380 BISCAYNE QAY SE
 City GRAND RAPIDS State MI Zip Code 49546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **02 / 08 / 2021**
Transaction ID : A3891EAB4A56A4CACAO3
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ZIRKLE, SYLVIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6410 OLD CHOCOLATE BAYOU RD.
 City MANVEL State TX Zip Code 77578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **06 / 28 / 2021**
Transaction ID : A12680A8184D84B49B4B
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ZOPPO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 493 BARRON AVENUE
 City WOODBRIDGE State NJ Zip Code 07095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **04 / 10 / 2021**
Transaction ID : A694786242575428FA91
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2295 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZOPPO, RICHARD, , ,

Mailing Address **493 BARRON AVENUE**

City WOODBIDGE	State NJ	Zip Code 07095
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
04 / 25 / 2021

Transaction ID : A9E24FBAA138B4819A0F

Amount of Each Receipt this Period
35.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZOPPO, RICHARD, , ,

Mailing Address **493 BARRON AVENUE**

City WOODBIDGE	State NJ	Zip Code 07095
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
05 / 10 / 2021

Transaction ID : A6D54B07EB49C4DA8831

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZOPPO, RICHARD, , ,

Mailing Address **493 BARRON AVENUE**

City WOODBIDGE	State NJ	Zip Code 07095
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
05 / 25 / 2021

Transaction ID : AB6CA13EC6F2A467DBB0

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2296 OF 3012
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZOPPO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 493 BARRON AVENUE
 City WOODBRIDGE State NJ Zip Code 07095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 10 / 2021
Transaction ID : A56068BEB037448EB8FD
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ZOPPO, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 493 BARRON AVENUE
 City WOODBRIDGE State NJ Zip Code 07095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 25 / 2021
Transaction ID : AAFE26A33B5D84264969
 Amount of Each Receipt this Period 35.00
 Memo Item

C. ZOZZARO, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 ORADELL AVE
 City PARAMUS State NJ Zip Code 07652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXCELSIOR PLUMBING AND HEATING CORP. Occupation (for Individual) PLUMBING MECHANIC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2021
Transaction ID : A51558D3B8AC04A5481A
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2297 OF 3012
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZYLIUS, CHARLES, , ,

Mailing Address 9705 S MANSFIELD

City OAK LAWN	State IL	Zip Code 60453
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2021

Transaction ID : AC69CA8D56AD64FB2912

Amount of Each Receipt this Period
15.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZYLIUS, CHARLES, , ,

Mailing Address 9705 S MANSFIELD

City OAK LAWN	State IL	Zip Code 60453
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2021

Transaction ID : A6F1AA51293AF4FE2B6E

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZYLIUS, CHARLES, , ,

Mailing Address 9705 S MANSFIELD

City OAK LAWN	State IL	Zip Code 60453
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2021

Transaction ID : A892AF98AEE29469E811

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2298 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 ZYLIUS, CHARLES, , ,
 Mailing Address 9705 S MANSFIELD
 City OAK LAWN State IL Zip Code 60453
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 15 / 2021
 Transaction ID : A429B459A6F564014A80
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 ZYLIUS, CHARLES, , ,
 Mailing Address 9705 S MANSFIELD
 City OAK LAWN State IL Zip Code 60453
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 16 / 2021
 Transaction ID : A9E65A08ADA7C4E06A24
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 ZYLIUS, CHARLES, , ,
 Mailing Address 9705 S MANSFIELD
 City OAK LAWN State IL Zip Code 60453
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 24 / 2021
 Transaction ID : A52D47BCBEF8940CCA9D
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	542322.78

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2299 OF 3012
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN SOLUTIONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	22	/	2021

Transaction ID : A2B634AAA6D1E4184995

Amount of Each Receipt this Period
288.00

Memo Item
MGMT OF ONLINE CAMPAIGN TO STOP JOE REFUND

B. CAMPAIGN SOLUTIONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2222.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2021

Transaction ID : A30720E324C34454DB50

Amount of Each Receipt this Period
1934.10

Memo Item
MGMT OF ONLINE CAMPAIGN TO STOP JOE REFUND

C. CAMPAIGN SOLUTIONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2581.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2021

Transaction ID : AE2AC7FFB7A754EAA93E

Amount of Each Receipt this Period
359.60

Memo Item
MGMT OF ONLINE CAMPAIGN TO STOP JOE REFUND

SUBTOTAL of Receipts This Page (optional).....	2581.70
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2300 OF 3012
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN SOLUTIONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2589.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021

Transaction ID : A406FC4F394044377BEA

Amount of Each Receipt this Period
8.10

Memo Item
MGMT OF ONLINE CAMPAIGN TO STOP JOE REFUND

B. CAMPAIGN SOLUTIONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2629.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2021

Transaction ID : A36E5AA32F20E4AF788E

Amount of Each Receipt this Period
40.09

Memo Item
MGMT OF ONLINE CAMPAIGN TO STOP JOE REFUND

C. CAMPAIGN SOLUTIONS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2708.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021

Transaction ID : A848A921CEDB64CE49C2

Amount of Each Receipt this Period
78.30

Memo Item
MGMT OF ONLINE CAMPAIGN TO STOP JOE REFUND

SUBTOTAL of Receipts This Page (optional).....	126.49
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2301 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STRATEGIC MEDIA PLACEMENT
 Mailing Address 7669 STAGERS LOOP
 City DELAWARE State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 205578.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2021
Transaction ID : AB995EE3FA8314D32851
 Amount of Each Receipt this Period
 205578.30
 Memo Item
TELEVISION ADVERTISING REFUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	205578.30
TOTAL This Period (last page this line number only).....▶	208286.49

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2302 OF 3012
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WRANISCHAR, MARY, , ,

Mailing Address 2716 CHAFFIN LN

City MAGNOLIA State AR Zip Code 71753

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2021

Transaction ID : AC7965009CB424D96901

Amount of Each Receipt this Period
1000.00

Memo Item
CAREY ACCOUNT

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ALEXPROP LLC		Date of Disbursement MM / DD / YYYY 02 / 03 / 2021	
Mailing Address 9060 FIG STREET		FEC Identification Number C [REDACTED] Transaction ID : B63D990339E Amount of Each Disbursement this Period 1000.00	
City ARVADA	State CO	Zip Code 80005	Category/ Type
Purpose of Disbursement RENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. ALEXPROP LLC		Date of Disbursement MM / DD / YYYY 03 / 05 / 2021	
Mailing Address 9060 FIG STREET		FEC Identification Number C [REDACTED] Transaction ID : BC58E8E117E Amount of Each Disbursement this Period 1000.00	
City ARVADA	State CO	Zip Code 80005	Category/ Type
Purpose of Disbursement RENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. ALEXPROP LLC		Date of Disbursement MM / DD / YYYY 03 / 30 / 2021	
Mailing Address 9060 FIG STREET		FEC Identification Number C [REDACTED] Transaction ID : B14EEDCEC Amount of Each Disbursement this Period 1000.00	
City ARVADA	State CO	Zip Code 80005	Category/ Type
Purpose of Disbursement RENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ALLEGIANCE LIST MARKETING		Date of Disbursement MM / DD / YYYY 06 / 22 / 2021
Mailing Address 15 NORTH KING STREET		FEC Identification Number C [REDACTED] Transaction ID : B8BF622E6F Amount of Each Disbursement this Period 2514.73
City LEESBURG	State VA	Zip Code 29175
Purpose of Disbursement DIRECT MAIL FUNDRAISING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ALLEGIANCE LIST MARKETING		Date of Disbursement MM / DD / YYYY 06 / 22 / 2021
Mailing Address 15 NORTH KING STREET		FEC Identification Number C [REDACTED] Transaction ID : B74FC0036D Amount of Each Disbursement this Period 375.00
City LEESBURG	State VA	Zip Code 29175
Purpose of Disbursement DIRECT MAIL FUNDRAISING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 04 / 02 / 2021
Mailing Address 3 WORLD FINANCIAL CENTER		FEC Identification Number C [REDACTED] Transaction ID : B76F1020BC Amount of Each Disbursement this Period 2050.19
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	4939.92
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. I360

Full Name (Last, First, Middle Initial)

Mailing Address 29374 NETWORK PL

City CHICAGO State IL Zip Code 60673-1293

Purpose of Disbursement DATA SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2021

FEC Identification Number: C

Transaction ID : B6F81DB6E1

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3 WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2021

FEC Identification Number: C

Transaction ID : BD7CC96E05

Amount of Each Disbursement this Period: 43.98

Memo Item

C. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 3 WORLD FINANCIAL CENTER

City NEW YORK State NY Zip Code 10285

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 21 / 2021

FEC Identification Number: C

Transaction ID : B873426B711

Amount of Each Disbursement this Period: 2349.83

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2393.81

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2021

FEC Identification Number

C
Transaction ID : **BB90DE7847**
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. OFFICE DEPOT

Mailing Address 2901 GALLOWS RD

City FALLS CHURCH State VA Zip Code 22042

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2021

FEC Identification Number

C
Transaction ID : **B8127493C13**
Amount of Each Disbursement this Period
142.00

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2021

FEC Identification Number

C
Transaction ID : **B6BF3D640E**
Amount of Each Disbursement this Period
250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 27 / 2021	
Mailing Address 3 WORLD FINANCIAL CENTER		FEC Identification Number C [] Transaction ID : B983B4FDE3 Amount of Each Disbursement this Period [] 352.28	
City NEW YORK	State NY	Zip Code 10285	Category/ Type []
Purpose of Disbursement CREDIT CARD PAYMENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 05 / 27 / 2021	
Mailing Address 475 L'ENFANT PLAZA SW		FEC Identification Number C [] Transaction ID : B25292EF286 Amount of Each Disbursement this Period [] 12.50	
City WASHINGTON	State DC	Zip Code 20260	Category/ Type []
Purpose of Disbursement POSTAGE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 28 / 2021	
Mailing Address 3 WORLD FINANCIAL CENTER		FEC Identification Number C [] Transaction ID : B215A896B6 Amount of Each Disbursement this Period [] 801.69	
City NEW YORK	State NY	Zip Code 10285	Category/ Type []
Purpose of Disbursement CREDIT CARD PAYMENT		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1153.97
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ADOBE

Full Name (Last, First, Middle Initial)

Mailing Address 345 PARK AVENUE

City SAN JOSE State CA Zip Code 95110

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 28 / 2021

FEC Identification Number: C

Transaction ID : **BF80B0B23C**

Amount of Each Disbursement this Period: 9.99

Memo Item

B. USPS

Full Name (Last, First, Middle Initial)

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 28 / 2021

FEC Identification Number: C

Transaction ID : **B4A00C078C**

Amount of Each Disbursement this Period: 650.00

Memo Item

C. ADOBE

Full Name (Last, First, Middle Initial)

Mailing Address 345 PARK AVENUE

City SAN JOSE State CA Zip Code 95110

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 28 / 2021

FEC Identification Number: C

Transaction ID : **B00CC82BE1**

Amount of Each Disbursement this Period: 33.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B1C0791732E

Amount of Each Disbursement this Period: 1772.56

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : B889D882EDI

Amount of Each Disbursement this Period: 15.00

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 08 / 2021

FEC Identification Number: C

Transaction ID : BF14214F72;

Amount of Each Disbursement this Period: 1.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1789.26

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : B8FE65A2E5

Amount of Each Disbursement this Period: 95.80

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 13 / 2021

FEC Identification Number: C

Transaction ID : B096C336CB

Amount of Each Disbursement this Period: 36.58

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 14 / 2021

FEC Identification Number: C

Transaction ID : BA968A4CA

Amount of Each Disbursement this Period: 93.84

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

226.22

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 19 / 2021

FEC Identification Number
C

Transaction ID : **B9CE7A2051!**

Amount of Each Disbursement this Period
40.40

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 20 / 2021

FEC Identification Number
C

Transaction ID : **B73BB9C6DC**

Amount of Each Disbursement this Period
29.60

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 20 / 2021

FEC Identification Number
C

Transaction ID : **B55925B52C**

Amount of Each Disbursement this Period
25.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.50

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		22		2021

FEC Identification Number

C [Redacted]
Transaction ID : BE84DFE0F8
 Amount of Each Disbursement this Period
 [Redacted] 158.86

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		26		2021

FEC Identification Number

C [Redacted]
Transaction ID : BFFED1ABC/
 Amount of Each Disbursement this Period
 [Redacted] 66.50

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		27		2021

FEC Identification Number

C [Redacted]
Transaction ID : B193B57FB6
 Amount of Each Disbursement this Period
 [Redacted] 26.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[Redacted] 251.46
[Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 28 / 2021

FEC Identification Number
C
Transaction ID : B953744C63f
Amount of Each Disbursement this Period
925.44

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 01 / 2021

FEC Identification Number
C
Transaction ID : B39E82C2C0l
Amount of Each Disbursement this Period
907.40

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 03 / 2021

FEC Identification Number
C
Transaction ID : B3B5285B3F
Amount of Each Disbursement this Period
322.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2155.64

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 02 / 03 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B289697A637
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Amount of Each Disbursement this Period [REDACTED] 393.10
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 02 / 05 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B6589DA47Ft
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Amount of Each Disbursement this Period [REDACTED] 171.10
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 02 / 09 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B5091611B0t
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Amount of Each Disbursement this Period [REDACTED] 197.22
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 761.42
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2021

FEC Identification Number

C
Transaction ID : B69489B791C
Amount of Each Disbursement this Period
122.78

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2021

FEC Identification Number

C
Transaction ID : BD6E86461A:
Amount of Each Disbursement this Period
499.20

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2021

FEC Identification Number

C
Transaction ID : BBB29F46D8
Amount of Each Disbursement this Period
230.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

852.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2021

FEC Identification Number: C

Transaction ID : B64BE54251

Amount of Each Disbursement this Period: 114.00

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2021

FEC Identification Number: C

Transaction ID : B895AC5CE6

Amount of Each Disbursement this Period: 214.50

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 19 / 2021

FEC Identification Number: C

Transaction ID : B66136BF18

Amount of Each Disbursement this Period: 110.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 438.98

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2021

FEC Identification Number

C
Transaction ID : B72DD4CC25
Amount of Each Disbursement this Period
475.32

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2021

FEC Identification Number

C
Transaction ID : B4005CE4552
Amount of Each Disbursement this Period
8.70

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2021

FEC Identification Number

C
Transaction ID : B84862FEA4
Amount of Each Disbursement this Period
654.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1138.68

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2021

FEC Identification Number

C
Transaction ID : B2851308DDI
Amount of Each Disbursement this Period
240.24

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2021

FEC Identification Number

C
Transaction ID : BE9215A0417
Amount of Each Disbursement this Period
282.78

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2021

FEC Identification Number

C
Transaction ID : B5DEDA3005
Amount of Each Disbursement this Period
171.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

694.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 05 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : BC967A2018 Amount of Each Disbursement this Period [REDACTED] 192.30
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 09 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : BA9A95A4D3 Amount of Each Disbursement this Period [REDACTED] 1066.80
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 10 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B350AF7905 Amount of Each Disbursement this Period [REDACTED] 0.70
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1259.80
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 11 / 2021

FEC Identification Number: C

Transaction ID : BC4E500856

Amount of Each Disbursement this Period: 325.22

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : BB800E05EF1

Amount of Each Disbursement this Period: 284.59

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : B8270F30AF

Amount of Each Disbursement this Period: 161.32

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

771.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 17 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B7BE175086/ Amount of Each Disbursement this Period 62.10
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 19 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B2B0A08A2B Amount of Each Disbursement this Period 739.60
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 23 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B39BBFB19/ Amount of Each Disbursement this Period 503.12
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

1304.82

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B535600278C Amount of Each Disbursement this Period 18.60
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B39CE963CB Amount of Each Disbursement this Period 717.14
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 03 / 29 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B35FEA0035 Amount of Each Disbursement this Period 498.90
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1234.64
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B5237855774
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B6E0D7E39A
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B18C1EB19E
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 04 / 06 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B76FF872C6I Amount of Each Disbursement this Period [REDACTED] 147.30
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 04 / 07 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B9223828828I Amount of Each Disbursement this Period [REDACTED] 16.70
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B6EF6A1076 Amount of Each Disbursement this Period [REDACTED] 114.30
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 278.30
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 12 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B8D30E4124
Amount of Each Disbursement this Period

[REDACTED] 112.40

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 14 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B3AB785CD5
Amount of Each Disbursement this Period

[REDACTED] 224.40

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 14 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B0C61BD357
Amount of Each Disbursement this Period

[REDACTED] 46.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 383.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 16 / 2021

FEC Identification Number

C
Transaction ID : B39BA23762
Amount of Each Disbursement this Period
167.80

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 20 / 2021

FEC Identification Number

C
Transaction ID : B402E2B59E
Amount of Each Disbursement this Period
57.90

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 21 / 2021

FEC Identification Number

C
Transaction ID : B4277FDF4C
Amount of Each Disbursement this Period
42.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

268.18

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2021

FEC Identification Number

C
Transaction ID : **BB90CBDD5/**
Amount of Each Disbursement this Period
337.80

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2021

FEC Identification Number

C
Transaction ID : **B44DF1C963I**
Amount of Each Disbursement this Period
573.12

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2021

FEC Identification Number

C
Transaction ID : **BDD027DB7I**
Amount of Each Disbursement this Period
85.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

995.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2021

FEC Identification Number

C
Transaction ID : B8B3E0D3CA
Amount of Each Disbursement this Period
384.02

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2021

FEC Identification Number

C
Transaction ID : B58EEC0EE8
Amount of Each Disbursement this Period
271.20

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2021

FEC Identification Number

C
Transaction ID : BF65A29382
Amount of Each Disbursement this Period
519.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1174.28

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	5		2	0	2	1		

FEC Identification Number

C [Redacted]
Transaction ID : BB946BB6E8
 Amount of Each Disbursement this Period
 [Redacted] 86.80

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	6		2	0	2	1		

FEC Identification Number

C [Redacted]
Transaction ID : BBBDA3A1F1
 Amount of Each Disbursement this Period
 [Redacted] 95.40

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	0		2	0	2	1		

FEC Identification Number

C [Redacted]
Transaction ID : BC7636EE70
 Amount of Each Disbursement this Period
 [Redacted] 854.76

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[Redacted]	1036.96
[Redacted]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 05 / 12 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : BB7E49F035 Amount of Each Disbursement this Period [REDACTED] 68.90
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 05 / 12 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B5E77F97C3I Amount of Each Disbursement this Period [REDACTED] 173.30
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : BBB76DA94 Amount of Each Disbursement this Period [REDACTED] 237.90
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 480.10
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		18		2021

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

FEC Identification Number

C

Transaction ID : B433246A2B

Amount of Each Disbursement this Period

145.50

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		19		2021

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

FEC Identification Number

C

Transaction ID : B3EFE691D2I

Amount of Each Disbursement this Period

27.10

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2021

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

FEC Identification Number

C

Transaction ID : BB44C51B0C

Amount of Each Disbursement this Period

93.68

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

266.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2021

FEC Identification Number

C
Transaction ID : **BB27D63D06**
Amount of Each Disbursement this Period
256.30

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2021

FEC Identification Number

C
Transaction ID : **B3AF7BDA3A**
Amount of Each Disbursement this Period
79.20

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2021

FEC Identification Number

C
Transaction ID : **B1DE0BB66f**
Amount of Each Disbursement this Period
158.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

493.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BE7533931FI
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC46687B52
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BF65ABDA7
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 06 / 03 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B1A057F02F! Amount of Each Disbursement this Period 10.00
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 06 / 07 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : BA080FA46B Amount of Each Disbursement this Period 140.70
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 06 / 09 / 2021
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C [REDACTED] Transaction ID : B4E386E3FB Amount of Each Disbursement this Period 7.10
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement PAYMENT PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

157.80

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BFCC389073
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BE8694BF7A!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B414B0C6A!
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 16 / 2021

FEC Identification Number: C
Transaction ID : B56CC5F8ED
Amount of Each Disbursement this Period: 50.80

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 17 / 2021

FEC Identification Number: C
Transaction ID : B4614F6AE4
Amount of Each Disbursement this Period: 6.40

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 21 / 2021

FEC Identification Number: C
Transaction ID : B9F963C4D6
Amount of Each Disbursement this Period: 58.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 115.70

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2021

FEC Identification Number

C
Transaction ID : B8ACF3D964
Amount of Each Disbursement this Period
52.60

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2021

FEC Identification Number

C
Transaction ID : B0C0FBB842
Amount of Each Disbursement this Period
122.88

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2021

FEC Identification Number

C
Transaction ID : B0235B977F
Amount of Each Disbursement this Period
81.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

256.68

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2021

FEC Identification Number

C [Redacted]
Transaction ID : BD8716A110I
 Amount of Each Disbursement this Period
 [Redacted] 62.30

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2021

FEC Identification Number

C [Redacted]
Transaction ID : BFE6E8DDAI
 Amount of Each Disbursement this Period
 [Redacted] 37.60

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2021

FEC Identification Number

C [Redacted]
Transaction ID : B201C7883A
 Amount of Each Disbursement this Period
 [Redacted] 42.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[Redacted]	142.60
[Redacted]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2021

FEC Identification Number

C
Transaction ID : B7FAE49D7F
Amount of Each Disbursement this Period
7.40

Memo Item

Full Name (Last, First, Middle Initial)

B. ASYMMETRIC SOLUTIONS LLC

Mailing Address 1520 MOCKINGBIRD LN
STE 568

City CHARLOTTE State NC Zip Code 28209-6230

Purpose of Disbursement
GA RUN-OFF BALLOT MONITORING FIELD STAFF

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2021

FEC Identification Number

C
Transaction ID : B4CF84A57C
Amount of Each Disbursement this Period
26314.13

Memo Item

Full Name (Last, First, Middle Initial)

C. ASYMMETRIC SOLUTIONS LLC

Mailing Address 1520 MOCKINGBIRD LN
STE 568

City CHARLOTTE State NC Zip Code 28209-6230

Purpose of Disbursement
GA RUN-OFF BALLOT MONITORING PROGRAM

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2021

FEC Identification Number

C
Transaction ID : BAF6B2B2D
Amount of Each Disbursement this Period
46152.79

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

72474.32

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEST GUEST MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3034

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement PR SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 14 / 2021

FEC Identification Number: C
Transaction ID : B3B555472F
Amount of Each Disbursement this Period: 3500.00

Memo Item

B. BEST GUEST MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3034

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement PR SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C
Transaction ID : BB4BEFCCA
Amount of Each Disbursement this Period: 3500.00

Memo Item

C. BEST GUEST MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3034

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement PR SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 11 / 2021

FEC Identification Number: C
Transaction ID : B1EAD979FF
Amount of Each Disbursement this Period: 3500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BEST GUEST MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3034

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement PR SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 12 / 2021

FEC Identification Number: C
Transaction ID : B03F60B919
Amount of Each Disbursement this Period: 3500.00

Memo Item

B. BEST GUEST MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3034

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement PR SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 28 / 2021

FEC Identification Number: C
Transaction ID : BBDB7284A5
Amount of Each Disbursement this Period: 3500.00

Memo Item

C. BEST GUEST MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3034

City WAYNE State NJ Zip Code 07474

Purpose of Disbursement PR SERVICES
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 14 / 2021

FEC Identification Number: C
Transaction ID : B5089F4E92
Amount of Each Disbursement this Period: 3500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C
Transaction ID : B122E57CEB
Amount of Each Disbursement this Period: 867.30

Memo Item

B. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C
Transaction ID : B29306D89AI
Amount of Each Disbursement this Period: 20496.60

Memo Item

C. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 09 / 2021

FEC Identification Number: C
Transaction ID : B60962811E
Amount of Each Disbursement this Period: 10656.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 32019.96

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 17 / 2021

FEC Identification Number: C

Transaction ID : **BB636E366E**

Amount of Each Disbursement this Period: 7649.54

Memo Item

B. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2021

FEC Identification Number: C

Transaction ID : **B59DEC337C**

Amount of Each Disbursement this Period: 20721.95

Memo Item

C. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2021

FEC Identification Number: C

Transaction ID : **B8151AB519**

Amount of Each Disbursement this Period: 36580.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 64951.97

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CAMPAIGN HQ		Date of Disbursement MM / DD / YYYY 03 / 11 / 2021	
Mailing Address P.O. BOX 257		FEC Identification Number C [] Transaction ID : BABC82D42E Amount of Each Disbursement this Period [] 11126.66	
City BROOKLYN	State IA	Zip Code 52211	Category/ Type []
Purpose of Disbursement STOP JOE PHONE CALLS		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) B. CAMPAIGN HQ		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021	
Mailing Address P.O. BOX 257		FEC Identification Number C [] Transaction ID : BE72954F5Bf Amount of Each Disbursement this Period [] 9591.37	
City BROOKLYN	State IA	Zip Code 52211	Category/ Type []
Purpose of Disbursement STOP JOE PHONE CALLS		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) C. CAMPAIGN HQ		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021	
Mailing Address P.O. BOX 257		FEC Identification Number C [] Transaction ID : BCDD36A5Ff Amount of Each Disbursement this Period [] 14692.95	
City BROOKLYN	State IA	Zip Code 52211	Category/ Type []
Purpose of Disbursement STOP JOE PHONE CALLS		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 35410.98	
TOTAL This Period (last page this line number only)..... ▶		[]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 06 / 2021

FEC Identification Number: C
Transaction ID : BA3BC6B756
Amount of Each Disbursement this Period: 4563.15

Memo Item

B. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 07 / 2021

FEC Identification Number: C
Transaction ID : B080322BAA
Amount of Each Disbursement this Period: 8603.27

Memo Item

C. CAMPAIGN HQ

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 257

City BROOKLYN State IA Zip Code 52211

Purpose of Disbursement BEST EFFORTS OUTREACH

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C
Transaction ID : B092E72B7F
Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13216.42

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b through 30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: CAMPAIGN HQ. Includes fields for Full Name, Mailing Address, City (BROOKLYN), State (IA), Zip Code (52211), Purpose of Disbursement (STOP JOE PHONE CALLS), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (05/11/2021), FEC Identification Number (C), Transaction ID (BC5191570F), Amount of Each Disbursement (3337.90), and Memo Item checkbox.

Form B: CAMPAIGN HQ. Includes fields for Full Name, Mailing Address, City (BROOKLYN), State (IA), Zip Code (52211), Purpose of Disbursement (STOP JOE PHONE CALLS), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (05/19/2021), FEC Identification Number (C), Transaction ID (B6D9D3404C), Amount of Each Disbursement (2387.52), and Memo Item checkbox.

Form C: CAMPAIGN SOLUTIONS. Includes fields for Full Name, Mailing Address (117 N SAINT ASAPH ST.), City (ALEXANDRIA), State (VA), Zip Code (22314), Purpose of Disbursement (MGMT OF ONLINE CAMPAIGN TO STOP JOE), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/03/2021), FEC Identification Number (C), Transaction ID (B3E7198D3E), Amount of Each Disbursement (12379.24), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 18104.66
TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 10 / 2021

FEC Identification Number
C
Transaction ID : BA95BD5FB2
Amount of Each Disbursement this Period
12059.80

Memo Item

B. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 17 / 2021

FEC Identification Number
C
Transaction ID : B93E4032B2C
Amount of Each Disbursement this Period
44001.64

Memo Item

C. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 19 / 2021

FEC Identification Number
C
Transaction ID : BA413D8FE7
Amount of Each Disbursement this Period
250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 56311.44

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2021

FEC Identification Number

C
Transaction ID : B6FBDEFA3f
Amount of Each Disbursement this Period
15490.30

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
GA RUNOFF ONLINE VOTER CONTACT: SEE EST TRANS ID#...4503919

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2021

FEC Identification Number

C
Transaction ID : B54FC0D158f
Amount of Each Disbursement this Period
88708.03

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
ONLINE VOTER CONTACT: SEE EST TRANS ID#...4BE3AFE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2021

FEC Identification Number

C
Transaction ID : B7E63FE51A
Amount of Each Disbursement this Period
43303.45

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

147501.78

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : BFAF1AA1F1
Amount of Each Disbursement this Period

[REDACTED] 23868.67

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B346481E2C4
Amount of Each Disbursement this Period

[REDACTED] 3100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : BAB624E2E5
Amount of Each Disbursement this Period

[REDACTED] 160.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 27129.42

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2021

FEC Identification Number

C
Transaction ID : **BF1532E715I**
Amount of Each Disbursement this Period
6626.65

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2021

FEC Identification Number

C
Transaction ID : **BD73C01DC8**
Amount of Each Disbursement this Period
17934.82

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2021

FEC Identification Number

C
Transaction ID : **BF117DFDEI**
Amount of Each Disbursement this Period
6625.61

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31187.08

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B84D42DC3F
Amount of Each Disbursement this Period

[REDACTED] 290.40

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B0ACAE38B7
Amount of Each Disbursement this Period

[REDACTED] 1007.64

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : BF21877E2A
Amount of Each Disbursement this Period

[REDACTED] 6000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 7298.04

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2021

FEC Identification Number

C
Transaction ID : B93EDF22CD
Amount of Each Disbursement this Period
5170.53

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2021

FEC Identification Number

C
Transaction ID : B66F22A8A4
Amount of Each Disbursement this Period
1582.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2021

FEC Identification Number

C
Transaction ID : BD5CFA4C11
Amount of Each Disbursement this Period
698.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7451.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2021

FEC Identification Number

C
Transaction ID : **B3A1176745E**
Amount of Each Disbursement this Period
1080.11

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2021

FEC Identification Number

C
Transaction ID : **BB0E90BDF7**
Amount of Each Disbursement this Period
4386.34

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2021

FEC Identification Number

C
Transaction ID : **B0225A959A**
Amount of Each Disbursement this Period
7700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

13166.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2021

FEC Identification Number

C
Transaction ID : B20FC3336D
Amount of Each Disbursement this Period
9140.49

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C
Transaction ID : B06FA655FF
Amount of Each Disbursement this Period
183.53

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2021

FEC Identification Number

C
Transaction ID : BCEB4046F7
Amount of Each Disbursement this Period
223.23

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9547.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 04 / 05 / 2021	
Mailing Address 117 N SAINT ASAPH ST.		FEC Identification Number C [REDACTED] Transaction ID : B5A128C356! Amount of Each Disbursement this Period [REDACTED] 8516.14	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement MGMT OF ONLINE CAMPAIGN TO STOP JOE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		
Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 04 / 05 / 2021	
Mailing Address 117 N SAINT ASAPH ST.		FEC Identification Number C [REDACTED] Transaction ID : B9E82ED806! Amount of Each Disbursement this Period [REDACTED] 9912.32	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement MGMT OF ONLINE CAMPAIGN TO STOP JOE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		
Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 04 / 11 / 2021	
Mailing Address 117 N SAINT ASAPH ST.		FEC Identification Number C [REDACTED] Transaction ID : BE700FC879 Amount of Each Disbursement this Period [REDACTED] 1343.43	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement MGMT OF ONLINE CAMPAIGN TO STOP JOE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 19771.89	
TOTAL This Period (last page this line number only)..... ▶		[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)
A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2021

FEC Identification Number

C []

Transaction ID : B3EAB02586
Amount of Each Disbursement this Period

[] 1654.99

Memo Item

Full Name (Last, First, Middle Initial)
B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2021

FEC Identification Number

C []

Transaction ID : BA5D9470357
Amount of Each Disbursement this Period

[] 1950.00

Memo Item

Full Name (Last, First, Middle Initial)
C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2021

FEC Identification Number

C []

Transaction ID : BA5311998D
Amount of Each Disbursement this Period

[] 16877.36

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 20482.35

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2021

FEC Identification Number

C
Transaction ID : **BE4608C49B**
Amount of Each Disbursement this Period
1405.37

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2021

FEC Identification Number

C
Transaction ID : **BCF6C65585**
Amount of Each Disbursement this Period
7067.10

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2021

FEC Identification Number

C
Transaction ID : **B7026323307**
Amount of Each Disbursement this Period
973.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9446.21

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : BC12368C36!
Amount of Each Disbursement this Period

[REDACTED] 2475.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : BC09CABD5!
Amount of Each Disbursement this Period

[REDACTED] 1126.27

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : B0E7D58B7!
Amount of Each Disbursement this Period

[REDACTED] 3882.11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 7483.38

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCIAL PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 04 / 2021

FEC Identification Number: C
Transaction ID : B1922E94A0!
Amount of Each Disbursement this Period: 11100.00

Memo Item

B. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 06 / 2021

FEC Identification Number: C
Transaction ID : B605F0141EF
Amount of Each Disbursement this Period: 287.38

Memo Item

C. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 13 / 2021

FEC Identification Number: C
Transaction ID : B878F3C774
Amount of Each Disbursement this Period: 1350.96

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12738.34

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	1

FEC Identification Number

C []
Transaction ID : B68C37946C1
 Amount of Each Disbursement this Period
 [] 5667.64

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	1

FEC Identification Number

C []
Transaction ID : BF1A0820896
 Amount of Each Disbursement this Period
 [] 2704.65

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	1

FEC Identification Number

C []
Transaction ID : B23FA4CA62
 Amount of Each Disbursement this Period
 [] 3757.42

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1	2	1	2	9	.	7	1
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2021

FEC Identification Number
C
Transaction ID : B11C499C7A
Amount of Each Disbursement this Period
6801.10

Memo Item

B. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 1415 S. VOSS SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement
PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 11 / 2021

FEC Identification Number
C
Transaction ID : BCEC508041
Amount of Each Disbursement this Period
500.00

Memo Item

C. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 1415 S. VOSS SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement
PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 20 / 2021

FEC Identification Number
C
Transaction ID : B1EB820DC
Amount of Each Disbursement this Period
300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7601.10

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 01 / 26 / 2021
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] Transaction ID : B4D907435A1 Amount of Each Disbursement this Period 400.00
City HOUSTON	State TX	Zip Code 77057
Purpose of Disbursement PR SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 02 / 02 / 2021
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] Transaction ID : B61427FC392 Amount of Each Disbursement this Period 200.00
City HOUSTON	State TX	Zip Code 77057
Purpose of Disbursement PR SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 02 / 09 / 2021
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] Transaction ID : B074AAE244 Amount of Each Disbursement this Period 150.00
City HOUSTON	State TX	Zip Code 77057
Purpose of Disbursement PR SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2021

FEC Identification Number: C []
Transaction ID : **BF6977429FF**
Amount of Each Disbursement this Period: [] 300.00

Memo Item

B. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 23 / 2021

FEC Identification Number: C []
Transaction ID : **B86351AC2EI**
Amount of Each Disbursement this Period: [] 150.00

Memo Item

C. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 02 / 2021

FEC Identification Number: C []
Transaction ID : **B6FE846FCF**
Amount of Each Disbursement this Period: [] 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ [] 500.00

TOTAL This Period (last page this line number only)..... ▶ []

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 03 / 17 / 2021	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] Transaction ID : B81D4092BF Amount of Each Disbursement this Period 100.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type
Purpose of Disbursement PR SERVICES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 03 / 30 / 2021	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] Transaction ID : B7C53307308 Amount of Each Disbursement this Period 250.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type
Purpose of Disbursement PR SERVICES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 04 / 06 / 2021	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] Transaction ID : B67748D149 Amount of Each Disbursement this Period 300.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type
Purpose of Disbursement PR SERVICES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 14 / 2021

FEC Identification Number: C

Transaction ID : **BF2496A958f**

Amount of Each Disbursement this Period: 350.00

Memo Item

B. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 20 / 2021

FEC Identification Number: C

Transaction ID : **B47D010C2A'**

Amount of Each Disbursement this Period: 100.00

Memo Item

C. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : **BE25CB0FFf**

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

700.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 05 / 07 / 2021	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [] Transaction ID : B662BE5278I Amount of Each Disbursement this Period [] 350.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type []
Purpose of Disbursement PR SERVICES		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [] Transaction ID : BDEA9B6DFE Amount of Each Disbursement this Period [] 50.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type []
Purpose of Disbursement PR SERVICES		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 05 / 26 / 2021	
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [] Transaction ID : BF42DD223F Amount of Each Disbursement this Period [] 250.00	
City HOUSTON	State TX	Zip Code 77057	Category/ Type []
Purpose of Disbursement PR SERVICES		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 650.00

TOTAL This Period (last page this line number only)..... ▶

[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 03 / 2021

FEC Identification Number: C

Transaction ID : BE27614B8D

Amount of Each Disbursement this Period: 50.00

Memo Item

B. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 08 / 2021

FEC Identification Number: C

Transaction ID : BFCC147B1D

Amount of Each Disbursement this Period: 150.00

Memo Item

C. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS
SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 16 / 2021

FEC Identification Number: C

Transaction ID : BEFF990EF2

Amount of Each Disbursement this Period: 150.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DELANO, JOSHUA, , ,		Date of Disbursement MM / DD / YYYY 06 / 23 / 2021
Mailing Address 1415 S. VOSS SUITE 110-329		FEC Identification Number C [REDACTED] Transaction ID : B6C133CF8B Amount of Each Disbursement this Period 200.00
City HOUSTON	State TX	Zip Code 77057
Purpose of Disbursement PR SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 04 / 26 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : B60DA98F80 Amount of Each Disbursement this Period 9284.66
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 05 / 07 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : B7DDD7819E Amount of Each Disbursement this Period 14943.71
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	24428.37
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. DIRECT RESPONSE, LLC

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2021

FEC Identification Number

C

Transaction ID : B8B613BB62
Amount of Each Disbursement this Period

7337.10

Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT RESPONSE, LLC

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2021

FEC Identification Number

C

Transaction ID : B994084E666
Amount of Each Disbursement this Period

278.19

Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT RESPONSE, LLC

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2021

FEC Identification Number

C

Transaction ID : B83B0FD8EE
Amount of Each Disbursement this Period

10696.57

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

18311.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. DIRECT RESPONSE, LLC

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2021

FEC Identification Number

C [Redacted]
Transaction ID : B7061F7D67f
 Amount of Each Disbursement this Period
 [Redacted] 139.59

Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT RESPONSE, LLC

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2021

FEC Identification Number

C [Redacted]
Transaction ID : BE7005543F9
 Amount of Each Disbursement this Period
 [Redacted] 4875.24

Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT RESPONSE, LLC

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2021

FEC Identification Number

C [Redacted]
Transaction ID : B4B5CE1E9f
 Amount of Each Disbursement this Period
 [Redacted] 1461.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[Redacted] 6476.09
[Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 06 / 11 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : BF8BD3872D Amount of Each Disbursement this Period [REDACTED] 351.45
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 06 / 11 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : BA43CAAEF4 Amount of Each Disbursement this Period [REDACTED] 81.30
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 06 / 11 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : B02104C777. Amount of Each Disbursement this Period [REDACTED] 6449.19
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 6881.94
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 06 / 17 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : BF4F2490D8 Amount of Each Disbursement this Period 1477.38
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 06 / 17 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : B1D4688992C Amount of Each Disbursement this Period 122.76
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DIRECT RESPONSE, LLC		Date of Disbursement MM / DD / YYYY 06 / 17 / 2021
Mailing Address 16845 N 29TH AVE STE 1550		FEC Identification Number C [REDACTED] Transaction ID : B8D53892B0 Amount of Each Disbursement this Period 1.98
City PHOENIX	State AZ	Zip Code 85053-0418
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1602.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. DIRECT RESPONSE, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2021

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Category/ Type

FEC Identification Number

C
Transaction ID : B8E0F4D9DE
Amount of Each Disbursement this Period
75.24

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT RESPONSE, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2021

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Category/ Type

FEC Identification Number

C
Transaction ID : BF07914D512
Amount of Each Disbursement this Period
15.84

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT RESPONSE, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2021

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Category/ Type

FEC Identification Number

C
Transaction ID : BC7F26578A
Amount of Each Disbursement this Period
9.90

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. DIRECT RESPONSE, LLC

Mailing Address 16845 N 29TH AVE
STE 1550

City PHOENIX State AZ Zip Code 85053-0418

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2021

FEC Identification Number

C
Transaction ID : B528DC71BA
Amount of Each Disbursement this Period
43.56

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2021

FEC Identification Number

C
Transaction ID : BB1FCEB625
Amount of Each Disbursement this Period
2560.96

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2021

FEC Identification Number

C
Transaction ID : B54EA6F6AC
Amount of Each Disbursement this Period
2873.41

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5477.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2021

FEC Identification Number

C
Transaction ID : B3E6F14FBE
Amount of Each Disbursement this Period
9140.60

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2021

FEC Identification Number

C
Transaction ID : BCE25600B3I
Amount of Each Disbursement this Period
3995.13

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2021

FEC Identification Number

C
Transaction ID : B67847D75E
Amount of Each Disbursement this Period
3122.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

16258.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2021

FEC Identification Number

C
Transaction ID : B8CB33424F
Amount of Each Disbursement this Period
3559.96

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2021

FEC Identification Number

C
Transaction ID : B55E12D7193
Amount of Each Disbursement this Period
2265.26

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2021

FEC Identification Number

C
Transaction ID : B3852B4BD1
Amount of Each Disbursement this Period
2562.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8387.62

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2021

FEC Identification Number

C
Transaction ID : B4A941ACC2
Amount of Each Disbursement this Period
4099.00

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2021

FEC Identification Number

C
Transaction ID : B80F7A69860
Amount of Each Disbursement this Period
3092.85

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2021

FEC Identification Number

C
Transaction ID : BBA5FA5FC
Amount of Each Disbursement this Period
2533.33

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

9725.18

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2021

FEC Identification Number

C
Transaction ID : BC5ACFDE1;
Amount of Each Disbursement this Period
3009.67

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2021

FEC Identification Number

C
Transaction ID : BCA7FED531
Amount of Each Disbursement this Period
3075.01

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2021

FEC Identification Number

C
Transaction ID : BCA71C8C2;
Amount of Each Disbursement this Period
1038.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7123.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2021

FEC Identification Number

C
Transaction ID : BE98FBE657
Amount of Each Disbursement this Period
1852.83

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2021

FEC Identification Number

C
Transaction ID : B3157A759F6
Amount of Each Disbursement this Period
1614.22

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2021

FEC Identification Number

C
Transaction ID : BBE909DAA
Amount of Each Disbursement this Period
2492.18

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5959.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2021

FEC Identification Number

C
Transaction ID : B2C5B4011C
Amount of Each Disbursement this Period
2211.87

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2021

FEC Identification Number

C
Transaction ID : B26FF064A2C
Amount of Each Disbursement this Period
4234.07

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2021

FEC Identification Number

C
Transaction ID : B7C6BE2063
Amount of Each Disbursement this Period
2827.59

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9273.53

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	1

FEC Identification Number

C [Redacted]
Transaction ID : BCA1DBE22I
 Amount of Each Disbursement this Period
 [Redacted] 2057.71

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	1

FEC Identification Number

C [Redacted]
Transaction ID : B87117F5D7I
 Amount of Each Disbursement this Period
 [Redacted] 1849.03

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	1

FEC Identification Number

C [Redacted]
Transaction ID : B1E7C8310B
 Amount of Each Disbursement this Period
 [Redacted] 2883.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[Redacted] 6790.37

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2021

FEC Identification Number

C
Transaction ID : B1B2DEA1C
Amount of Each Disbursement this Period
1815.87

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2021

FEC Identification Number

C
Transaction ID : B548803CA3I
Amount of Each Disbursement this Period
1728.00

Memo Item

Full Name (Last, First, Middle Initial)

C. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2021

FEC Identification Number

C
Transaction ID : B760A0EEE2
Amount of Each Disbursement this Period
3293.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6837.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2021

FEC Identification Number

C
Transaction ID : **BB871447D9**
Amount of Each Disbursement this Period
2613.72

Memo Item

Full Name (Last, First, Middle Initial)

B. EDONATION

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2021

FEC Identification Number

C
Transaction ID : **B714D188304**
Amount of Each Disbursement this Period
1181.92

Memo Item

Full Name (Last, First, Middle Initial)

C. FRONT PORCH STRATEGIES

Mailing Address PO BOX 314

City LEWIS CENTER State OH Zip Code 43035-0314

Purpose of Disbursement
STOP JOE TELETOWN HALL

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2021

FEC Identification Number

C
Transaction ID : **B7E031A3B1**
Amount of Each Disbursement this Period
11979.42

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15775.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. FRONT PORCH STRATEGIES

Mailing Address PO BOX 314

City LEWIS CENTER State OH Zip Code 43035-0314

Purpose of Disbursement
STOP JOE TELETOWN HALL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 12 / 2021

FEC Identification Number

C
Transaction ID : B5DFD64805
Amount of Each Disbursement this Period
14261.74

Memo Item

Full Name (Last, First, Middle Initial)

B. FRONT PORCH STRATEGIES

Mailing Address PO BOX 314

City LEWIS CENTER State OH Zip Code 43035-0314

Purpose of Disbursement
STOP JOE TELETOWN HALL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2021

FEC Identification Number

C
Transaction ID : B60315E512E
Amount of Each Disbursement this Period
10302.04

Memo Item

Full Name (Last, First, Middle Initial)

C. HOLLYWOOD CONSERVATIVE LLC

Mailing Address 216 W TUJUNGA AVE
APT B

City BURBANK State CA Zip Code 91502-2369

Purpose of Disbursement
STOP JOE TOWNHALL HOSTING SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 05 / 2021

FEC Identification Number

C
Transaction ID : BA6F9A2CF:
Amount of Each Disbursement this Period
1600.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

26163.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HOLLYWOOD CONSERVATIVE LLC		Date of Disbursement MM / DD / YYYY 04 / 02 / 2021
Mailing Address 216 W TUJUNGA AVE APT B		FEC Identification Number C [] Transaction ID : BE7283548C Amount of Each Disbursement this Period [] 800.00
City BURBANK	State CA	Zip Code 91502-2369
Purpose of Disbursement STOP JOE TOWNHALL HOSTING SERVICES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HOLLYWOOD CONSERVATIVE LLC		Date of Disbursement MM / DD / YYYY 05 / 10 / 2021
Mailing Address 216 W TUJUNGA AVE APT B		FEC Identification Number C [] Transaction ID : B0B43CE244I Amount of Each Disbursement this Period [] 500.00
City BURBANK	State CA	Zip Code 91502-2369
Purpose of Disbursement STOP JOE TOWNHALL HOSTING SERVICES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. INFOCISION MANAGEMENT CORPORATION		Date of Disbursement MM / DD / YYYY 02 / 09 / 2021
Mailing Address P.O. BOX 932441		FEC Identification Number C [] Transaction ID : B9312E0953; Amount of Each Disbursement this Period [] 5635.20
City CLEVELAND	State OH	Zip Code 44193
Purpose of Disbursement STOP JOE PHONE CALLS		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6935.20
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2021

FEC Identification Number

C
Transaction ID : **BD3B773E05**
Amount of Each Disbursement this Period
8847.35

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2021

FEC Identification Number

C
Transaction ID : **BE22665488F**
Amount of Each Disbursement this Period
1339.60

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE TELETOWNHALL OUTBOUND COSTS

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2021

FEC Identification Number

C
Transaction ID : **B82096BA7C**
Amount of Each Disbursement this Period
7815.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

18002.47

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2021

FEC Identification Number

C
Transaction ID : B2F646B1B6
Amount of Each Disbursement this Period
1920.33

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE SUPPORT LETTERS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2021

FEC Identification Number

C
Transaction ID : BD62C7C3B8
Amount of Each Disbursement this Period
85.50

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2021

FEC Identification Number

C
Transaction ID : B0EC40034C
Amount of Each Disbursement this Period
3525.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5530.83

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE TOWNHALL PHONE MINUTES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	6		2	0	2	1		

FEC Identification Number

C [REDACTED]

Transaction ID : B9EA31550C
Amount of Each Disbursement this Period

[REDACTED] 3684.25

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE TOWNHALL RELATED COSTS

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		1	4		2	0	2	1		

FEC Identification Number

C [REDACTED]

Transaction ID : B779256E61E
Amount of Each Disbursement this Period

[REDACTED] 3753.10

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	0		2	0	2	1		

FEC Identification Number

C [REDACTED]

Transaction ID : B91F375079
Amount of Each Disbursement this Period

[REDACTED] 969.05

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 8406.40

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2021

FEC Identification Number

C
Transaction ID : B68BF9E8E1
Amount of Each Disbursement this Period
1966.85

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE LETTER

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2021

FEC Identification Number

C
Transaction ID : BA85B0BCFL
Amount of Each Disbursement this Period
2530.53

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE MESSAGING

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2021

FEC Identification Number

C
Transaction ID : BCC50CB6E
Amount of Each Disbursement this Period
3627.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8125.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE MESSAGING

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2021

FEC Identification Number

C
Transaction ID : **BF0ED87432**
Amount of Each Disbursement this Period
1740.68

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 24 / 2021

FEC Identification Number

C
Transaction ID : **BFD31157023**
Amount of Each Disbursement this Period
3113.12

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 26 / 2021

FEC Identification Number

C
Transaction ID : **BF4C07CAF6**
Amount of Each Disbursement this Period
688.97

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5542.77

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2021

FEC Identification Number

C
Transaction ID : B757A3B3E5
Amount of Each Disbursement this Period
71.80

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2021

FEC Identification Number

C
Transaction ID : B5FB9F4077E
Amount of Each Disbursement this Period
5369.45

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORPORATION

Mailing Address P.O. BOX 932441

City CLEVELAND State OH Zip Code 44193

Purpose of Disbursement
STOP JOE PHONE CALLS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2021

FEC Identification Number

C
Transaction ID : BBE9CCF67
Amount of Each Disbursement this Period
109.05

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5550.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LEONARD, MARK, , ,		Date of Disbursement MM / DD / YYYY 02 / 02 / 2021
Mailing Address 8847 N SUNBURST TRL		FEC Identification Number C [REDACTED] Transaction ID : B0B3906BB3 Amount of Each Disbursement this Period [REDACTED] 750.00
City PARKER	State CO	Zip Code 80134-6921
Purpose of Disbursement TECHNOLOGY MANAGEMENT & SERVICES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 01 / 04 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : BFCEBC18F2 Amount of Each Disbursement this Period [REDACTED] 4500.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMPLIANCE SERVICES		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 01 / 04 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : BA2BBCCC3 Amount of Each Disbursement this Period [REDACTED] 10792.22
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAYROLL, BENEFITS & SERVICES FEES		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 16042.22
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARVEY, TED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3010 WYECLIFF LANE

City HIGHLANDS RANCH State CO Zip Code 80126

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2F25FA427!

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. BANGHART, CHAD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4428 TANEY AVE APT. 402

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDD8935C58!

Amount of Each Disbursement this Period: 3125.00

Memo Item

C. PAC MANAGEMENT SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 950 N WASHINGTON ST. STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PAYROLL, BENEFITS & SERVICES FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : BFA61FB061

Amount of Each Disbursement this Period: 9812.43

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9812.43

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BANGHART, CHAD, , ,		Date of Disbursement MM / DD / YYYY 01 / 20 / 2021
Mailing Address 4428 TANEY AVE APT. 402		FEC Identification Number C [REDACTED] Transaction ID : BCF2E02ABE Amount of Each Disbursement this Period [REDACTED] 3125.00
City ALEXANDRIA	State VA	Zip Code 22304
Purpose of Disbursement PAYROLL		<input type="checkbox"/> 001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HARVEY, TED, , ,		Date of Disbursement MM / DD / YYYY 01 / 20 / 2021
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [REDACTED] Transaction ID : BC5A98470F Amount of Each Disbursement this Period [REDACTED] 4000.00
City HIGHLANDS RANCH	State CO	Zip Code 80126
Purpose of Disbursement PAYROLL		<input type="checkbox"/> 001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 02 / 01 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : B7BD9AA8E Amount of Each Disbursement this Period [REDACTED] 4500.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMPLIANCE SERVICES		<input type="checkbox"/> 001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 4500.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYROLL, BENEFITS & SERVICES FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2021

FEC Identification Number

C
Transaction ID : B9ABC3A939
Amount of Each Disbursement this Period
9778.61

Memo Item

Full Name (Last, First, Middle Initial)

B. BANGHART, CHAD, , ,

Mailing Address 4428 TANEY AVE
APT. 402

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2021

FEC Identification Number

C
Transaction ID : B4BCF72D54
Amount of Each Disbursement this Period
3125.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HARVEY, TED, , ,

Mailing Address 3010 WYECLIFF LANE

City HIGHLANDS RANCH State CO Zip Code 80126

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 17 / 2021

FEC Identification Number

C
Transaction ID : BDE029EA05
Amount of Each Disbursement this Period
4000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9778.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYROLL, BENEFITS & SERVICES FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2021

FEC Identification Number

C
Transaction ID : B4F5F8FC3F
Amount of Each Disbursement this Period
9778.56

Memo Item

Full Name (Last, First, Middle Initial)

B. BANGHART, CHAD, , ,

Mailing Address 4428 TANEY AVE
APT. 402

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2021

FEC Identification Number

C
Transaction ID : B1C2EFA803
Amount of Each Disbursement this Period
3125.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HARVEY, TED, , ,

Mailing Address 3010 WYECLIFF LANE

City HIGHLANDS RANCH State CO Zip Code 80126

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2021

FEC Identification Number

C
Transaction ID : B59ADF28F1
Amount of Each Disbursement this Period
4000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9778.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMPLIANCE SERVICES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2021

FEC Identification Number

C
Transaction ID : B0E9A7F63F
Amount of Each Disbursement this Period
4500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYROLL, BENEFITS & SERVICES FEES

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify)

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2021

FEC Identification Number

C
Transaction ID : B0AF59F7D9:
Amount of Each Disbursement this Period
9778.62

Memo Item

Full Name (Last, First, Middle Initial)

C. HARVEY, TED, , ,

Mailing Address 3010 WYECLIFF LANE

City HIGHLANDS RANCH State CO Zip Code 80126

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2021

FEC Identification Number

C
Transaction ID : B339376F78:
Amount of Each Disbursement this Period
4000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

14278.62

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BANGHART, CHAD, , ,		Date of Disbursement MM / DD / YYYY 04 / 12 / 2021
Mailing Address 4428 TANEY AVE APT. 402		FEC Identification Number C [REDACTED] Transaction ID : B1239D3AD8 Amount of Each Disbursement this Period 3125.00
City ALEXANDRIA	State VA	Zip Code 22304
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 04 / 16 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : BFEDF684E1' Amount of Each Disbursement this Period 4500.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMPLIANCE SERVICES		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 04 / 27 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : BA38BC5547 Amount of Each Disbursement this Period 9778.62
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAYROLL, BENEFITS & SERVICES FEES		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	14278.62
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARVEY, TED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3010 WYECLIFF LANE

City HIGHLANDS RANCH State CO Zip Code 80126

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : **BF4CB7219D**

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. BANGHART, CHAD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4428 TANEY AVE APT. 402

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : **B221644C35A**

Amount of Each Disbursement this Period: 3125.00

Memo Item

C. PAC MANAGEMENT SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 950 N WASHINGTON ST. STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement COMPLIANCE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2021

FEC Identification Number: C

Transaction ID : **B253D1A98E**

Amount of Each Disbursement this Period: 4500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2021

FEC Identification Number

C

Transaction ID : B085F92E30
Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYROLL, BENEFITS & SERVICES FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2021

FEC Identification Number

C

Transaction ID : B89871D81E3
Amount of Each Disbursement this Period

9778.61

Memo Item

Full Name (Last, First, Middle Initial)

C. BANGHART, CHAD, , ,

Mailing Address 4428 TANEY AVE
APT. 402

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2021

FEC Identification Number

C

Transaction ID : B89D026973I
Amount of Each Disbursement this Period

3125.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11278.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HARVEY, TED, , ,		Date of Disbursement MM / DD / YYYY 05 / 10 / 2021
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [REDACTED] Transaction ID : BAEBB3C0E1 Amount of Each Disbursement this Period 4000.00
City HIGHLANDS RANCH	State CO	Zip Code 80126
Purpose of Disbursement PAYROLL		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 05 / 18 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : B908A195D21 Amount of Each Disbursement this Period 759.20
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement CAGING SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 05 / 26 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : BB6BFF8691 Amount of Each Disbursement this Period 9787.22
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAYROLL, BENEFITS & SERVICES FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10546.42
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HARVEY, TED, , ,		Date of Disbursement MM / DD / YYYY 05 / 26 / 2021
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [REDACTED] Transaction ID : BCD4A8112C Amount of Each Disbursement this Period 4000.00
City HIGHLANDS RANCH	State CO	Zip Code 80126
Purpose of Disbursement PAYROLL	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BANGHART, CHAD, , ,		Date of Disbursement MM / DD / YYYY 05 / 26 / 2021
Mailing Address 4428 TANEY AVE APT. 402		FEC Identification Number C [REDACTED] Transaction ID : B01D32186A7 Amount of Each Disbursement this Period 3125.00
City ALEXANDRIA	State VA	Zip Code 22304
Purpose of Disbursement PAYROLL	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 06 / 07 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : B1D76FC831 Amount of Each Disbursement this Period 6000.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMPLIANCE SERVICES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
BEST EFFORTS SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2021

FEC Identification Number

C
Transaction ID : B4A65BB3AI
Amount of Each Disbursement this Period
170.88

Memo Item

Full Name (Last, First, Middle Initial)

B. PAC MANAGEMENT SERVICES

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAYROLL, BENEFITS & SERVICES FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2021

FEC Identification Number

C
Transaction ID : B8CFB92B3A
Amount of Each Disbursement this Period
9532.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BANGHART, CHAD, , ,

Mailing Address 4428 TANEY AVE
APT. 402

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2021

FEC Identification Number

C
Transaction ID : B6A2D03F1E
Amount of Each Disbursement this Period
3125.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9702.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HARVEY, TED, , ,		Date of Disbursement MM / DD / YYYY 06 / 14 / 2021
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [] Transaction ID : B131995A3C: Amount of Each Disbursement this Period 4000.00
City HIGHLANDS RANCH	State CO	Zip Code 80126
Purpose of Disbursement PAYROLL	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 06 / 28 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [] Transaction ID : B5DB4617D8I Amount of Each Disbursement this Period 357.26
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement CAGING SERVICES	Category/ Type []	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 06 / 29 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [] Transaction ID : BCB8C2843C Amount of Each Disbursement this Period 10098.86
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAYROLL, BENEFITS & SERVICES FEES	Category/ Type []	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	10456.12
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HARVEY, TED, , ,		Date of Disbursement MM / DD / YYYY 06 / 29 / 2021
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [REDACTED] Transaction ID : BEDC8C63CI Amount of Each Disbursement this Period 4000.00
City HIGHLANDS RANCH	State CO	Zip Code 80126
Purpose of Disbursement PAYROLL	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BANGHART, CHAD, , ,		Date of Disbursement MM / DD / YYYY 06 / 29 / 2021
Mailing Address 4428 TANEY AVE APT. 402		FEC Identification Number C [REDACTED] Transaction ID : BE5E7D6D99 Amount of Each Disbursement this Period 3125.00
City ALEXANDRIA	State VA	Zip Code 22304
Purpose of Disbursement PAYROLL	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. POLITICAL.LAW PLLC		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 441 NORTH LEE STREET SUITE 300		FEC Identification Number C [REDACTED] Transaction ID : BAC5B1A5E Amount of Each Disbursement this Period 6000.00
City ALEXANDRIA	State VA	Zip Code 22314-2301
Purpose of Disbursement LEGAL SERVICES	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. POLITICAL.LAW PLLC

Mailing Address 441 NORTH LEE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-2301

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 15 / 2021

FEC Identification Number

C
Transaction ID : BDBC96138E
Amount of Each Disbursement this Period
 18880.00

Memo Item

Full Name (Last, First, Middle Initial)

B. POLITICAL.LAW PLLC

Mailing Address 441 NORTH LEE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-2301

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 16 / 2021

FEC Identification Number

C
Transaction ID : B28607FB8D
Amount of Each Disbursement this Period
 19182.00

Memo Item

Full Name (Last, First, Middle Initial)

C. POLITICAL.LAW PLLC

Mailing Address 441 NORTH LEE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-2301

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 16 / 2021

FEC Identification Number

C
Transaction ID : B278BCB241
Amount of Each Disbursement this Period
 22500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

60562.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. POLITICAL.LAW PLLC		Date of Disbursement MM / DD / YYYY 04 / 16 / 2021
Mailing Address 441 NORTH LEE STREET SUITE 300		FEC Identification Number C [REDACTED] Transaction ID : B74F53505C Amount of Each Disbursement this Period 22500.00
City ALEXANDRIA	State VA	Zip Code 22314-2301
Purpose of Disbursement LEGAL SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. POLITICAL.LAW PLLC		Date of Disbursement MM / DD / YYYY 05 / 18 / 2021
Mailing Address 441 NORTH LEE STREET SUITE 300		FEC Identification Number C [REDACTED] Transaction ID : B94A8409CEI Amount of Each Disbursement this Period 1960.00
City ALEXANDRIA	State VA	Zip Code 22314-2301
Purpose of Disbursement LEGAL SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. RRTVMEDIA, LLC		Date of Disbursement MM / DD / YYYY 03 / 05 / 2021
Mailing Address 3948 3RD STREET S SUITE 18		FEC Identification Number C [REDACTED] Transaction ID : B024D6CBA Amount of Each Disbursement this Period 8453.00
City JACKSONVILLE BEACH	State FL	Zip Code 32250
Purpose of Disbursement VIDEO PRODUCTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

32913.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RRTVMEDIA, LLC		Date of Disbursement MM / DD / YYYY 03 / 11 / 2021	
Mailing Address 3948 3RD STREET S SUITE 18		FEC Identification Number C [REDACTED] Transaction ID : B75703268BI Amount of Each Disbursement this Period 20000.00	
City JACKSONVILLE BEACH	State FL	Zip Code 32250	Category/Type [REDACTED]
Purpose of Disbursement STOP JOE TV ADS		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. RRTVMEDIA, LLC		Date of Disbursement MM / DD / YYYY 03 / 17 / 2021	
Mailing Address 3948 3RD STREET S SUITE 18		FEC Identification Number C [REDACTED] Transaction ID : B91869043FB Amount of Each Disbursement this Period 35000.00	
City JACKSONVILLE BEACH	State FL	Zip Code 32250	Category/Type [REDACTED]
Purpose of Disbursement STOP JOE TV ADS		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. RRTVMEDIA, LLC		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 3948 3RD STREET S SUITE 18		FEC Identification Number C [REDACTED] Transaction ID : B9C91ED69I Amount of Each Disbursement this Period 10000.00	
City JACKSONVILLE BEACH	State FL	Zip Code 32250	Category/Type [REDACTED]
Purpose of Disbursement STOP JOE TV ADS		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	65000.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RRTVMEDIA, LLC		Date of Disbursement MM / DD / YYYY 04 / 02 / 2021
Mailing Address 3948 3RD STREET S SUITE 18		FEC Identification Number C [REDACTED] Transaction ID : B8A5E2D6C5 Amount of Each Disbursement this Period 15000.00
City JACKSONVILLE BEACH	State FL	Zip Code 32250
Purpose of Disbursement STOP JOE TV ADS	Category/Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RRTVMEDIA, LLC		Date of Disbursement MM / DD / YYYY 04 / 15 / 2021
Mailing Address 3948 3RD STREET S SUITE 18		FEC Identification Number C [REDACTED] Transaction ID : B7531B35BE! Amount of Each Disbursement this Period 20000.00
City JACKSONVILLE BEACH	State FL	Zip Code 32250
Purpose of Disbursement STOP JOE TV ADS	Category/Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. THE STRATEGY GROUP FOR MEDIA		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 7669 STAGERS LOOP		FEC Identification Number C [REDACTED] Transaction ID : BD78FDDB5! Amount of Each Disbursement this Period 1740.00
City DELAWARE	State OH	Zip Code 43015
Purpose of Disbursement VIDEO PRODUCTION	Category/Type	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	36740.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZENICA LLC

Full Name (Last, First, Middle Initial)

Mailing Address 25 HIGH STREET #507

City PORTLAND State ME Zip Code 04101

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : BE7F23D714

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. ZENICA LLC

Full Name (Last, First, Middle Initial)

Mailing Address 25 HIGH STREET #507

City PORTLAND State ME Zip Code 04101

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C

Transaction ID : BB848E42394

Amount of Each Disbursement this Period: 4000.00

Memo Item

C. ZENICA LLC

Full Name (Last, First, Middle Initial)

Mailing Address 25 HIGH STREET #507

City PORTLAND State ME Zip Code 04101

Purpose of Disbursement PR SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2021

FEC Identification Number: C

Transaction ID : BF09F1B3DF

Amount of Each Disbursement this Period: 3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11000.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. ZENICA LLC

Mailing Address 25 HIGH STREET
#507

City
PORTLAND

State
ME

Zip Code
04101

Purpose of Disbursement
PR SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	2	1		

FEC Identification Number

C

Transaction ID : B328D7FA01:
Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ZENICA LLC

Mailing Address 25 HIGH STREET
#507

City
PORTLAND

State
ME

Zip Code
04101

Purpose of Disbursement
PR SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	2	1		

FEC Identification Number

C

Transaction ID : B0648FE4F6E
Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ZENICA LLC

Mailing Address 25 HIGH STREET
#507

City
PORTLAND

State
ME

Zip Code
04101

Purpose of Disbursement
PR SERVICES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	2	1		

FEC Identification Number

C

Transaction ID : B6932C343D
Amount of Each Disbursement this Period

3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9000.00

1268913.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CLAUDIA TENNEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 01 / 29 / 2021
Mailing Address PO BOX 244		FEC Identification Number C00632828 Transaction ID : BBDC166CD Amount of Each Disbursement this Period 5000.00
City CLINTON	State NY	Zip Code 13323-0244
Purpose of Disbursement RECOUNT CONTRIBUTION		011 Category/ Type
Candidate Name TENNEY, CLAUDIA, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT	
State: NY	District: 22	

Full Name (Last, First, Middle Initial) B. GEORGIANS FOR KELLY LOEFFLER		Date of Disbursement MM / DD / YYYY 01 / 06 / 2021
Mailing Address PO BOX 20036		FEC Identification Number C00729608 Transaction ID : B4DBFF68D9 Amount of Each Disbursement this Period 75.00
City ATLANTA	State GA	Zip Code 30325-0036
Purpose of Disbursement EARMARKED CONTRIBUTION FROM SHELBY ANNAN		011 Category/ Type
Candidate Name LOEFFLER, KELLY, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2021 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ RUNOFF	
State: GA	District:	

Full Name (Last, First, Middle Initial) C. GEORGIANS FOR KELLY LOEFFLER		Date of Disbursement MM / DD / YYYY 01 / 06 / 2021
Mailing Address PO BOX 20036		FEC Identification Number C00729608 Transaction ID : B9F322694A Amount of Each Disbursement this Period 20.00
City ATLANTA	State GA	Zip Code 30325-0036
Purpose of Disbursement EARMARKED CONTRIBUTION FROM JANICE LABROSSE		011 Category/ Type
Candidate Name LOEFFLER, KELLY, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2021 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ RUNOFF	
State: GA	District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5095.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. GEORGIANS FOR KELLY LOEFFLER

Mailing Address PO BOX 20036

City ATLANTA State GA Zip Code 30325-0036

Purpose of Disbursement
EARMARKED CONTRIBUTION FROM DAVID LEINWEBER

011
Category/
Type

Candidate Name
LOEFFLER, KELLY, , ,

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) ▼ RUNOFF
State: GA District:

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2021

FEC Identification Number

C C00729608

Transaction ID : B5BBD8E87C

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PERDUE FOR SENATE

Mailing Address PO BOX 12077

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement
VOIDED CONTRIBUTION

011
Category/
Type

Candidate Name
PERDUE, DAVID, , ,

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) ▼ RUNOFF
State: GA District:

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2021

FEC Identification Number

C C00547570

Transaction ID : BF0B23C5494

Amount of Each Disbursement this Period

- 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

- 4950.00

TOTAL This Period (last page this line number only)..... ▶

145.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ABLAVSKIY, FELIX, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 852 TYSENS LANE		FEC Identification Number C [REDACTED]	
City STATEN ISLAND	State NY	Zip Code 10306	Transaction ID : BEE71C63F0
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 100.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ABRAMS, CHERYL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7120 APPALOOSA RIDGE ST.		FEC Identification Number C [REDACTED]	
City LAS VEGAS	State NV	Zip Code 89131	Transaction ID : B7857AD1ED
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ADAMS, EVA, ADRIENNE, ,		Date of Disbursement MM / DD / YYYY 01 / 21 / 2021	
Mailing Address 1918 HALAKAU PLACE		FEC Identification Number C [REDACTED]	
City HONOLULU	State HI	Zip Code 96821	Transaction ID : BB5E4B9045
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ADAMS, EVA, ADRIENNE, ,		Date of Disbursement MM / DD / YYYY 01 / 21 / 2021	
Mailing Address 1918 HALAKAU PLACE		FEC Identification Number C [REDACTED] Transaction ID : B2E562EF9B	
City HONOLULU	State HI	Zip Code 96821	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ADAMS, ROB, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 209 BLUESTEM		FEC Identification Number C [REDACTED] Transaction ID : BE60F41B50:	
City ALEDO	State TX	Zip Code 76008	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ADAMS, SUE, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 10105 PEORIA AVE		FEC Identification Number C [REDACTED] Transaction ID : B721720D53:	
City LUBBOCK	State TX	Zip Code 79423	Amount of Each Disbursement this Period 35.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ADAMS, SUE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10105 PEORIA AVE

City LUBBOCK State TX Zip Code 79423

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BE75F531BA

Amount of Each Disbursement this Period: 35.00

Memo Item

B. ADAMS, SUE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10105 PEORIA AVE

City LUBBOCK State TX Zip Code 79423

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB53ACE2EC

Amount of Each Disbursement this Period: 35.00

Memo Item

C. ADAMS, SUE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10105 PEORIA AVE

City LUBBOCK State TX Zip Code 79423

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B75152445C

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AGNEW, JACQUELINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14238 REFLECTION LAKES DR

City FORT MYERS State FL Zip Code 33907

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : BEF722CCF7

Amount of Each Disbursement this Period: 35.00

Memo Item

B. AHRENS, EDDIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 143 ORCHARD RUN

City NATCHITOCHES State LA Zip Code 71457

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B8DDF1055D

Amount of Each Disbursement this Period: 50.00

Memo Item

C. AHRENS, EDDIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 143 ORCHARD RUN

City NATCHITOCHES State LA Zip Code 71457

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BF32EC274F

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AHRENS, EDDIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 143 ORCHARD RUN

City NATCHITOCHEs State LA Zip Code 71457

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BF4762115E2**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. AINSWORTH, JOHNNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1065 SKYLINE BLVD

City EDMOND State OK Zip Code 73025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : **BC26C794DE**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. AKERSON, MARSHA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1309 W 16 READ

City AURORA State NE Zip Code 68818

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B9FFE1BA5I**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AKWA, VICTORINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5916 63 AVE N

City BROOKLYN PARK State MN Zip Code 55429

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BEAFB7F00C

Amount of Each Disbursement this Period: 15.00

Memo Item

B. ALGIRE, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 309 MOSSY OAK TRL

City FORT WORTH State TX Zip Code 76131

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC7211E135E

Amount of Each Disbursement this Period: 35.00

Memo Item

C. ALLAN, DENNIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10030 COLUMBUS RD.SW

City DEMING State NM Zip Code 88030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC9DBBD56

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLDREDGE, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 317

City NEOLA State UT Zip Code 84053

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BFCD30A182**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ALLDREDGE, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 317

City NEOLA State UT Zip Code 84053

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B28512B809E**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ALLDREDGE, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 317

City NEOLA State UT Zip Code 84053

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B10B979976I**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALLDREDGE, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 317

City NEOLA State UT Zip Code 84053

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BEE37FAA45

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ALLEN, BEVERLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2 WEST WESLEY ROAD, NW UNIT #11

City ATLANTA State GA Zip Code 30305

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B96DB9AA43

Amount of Each Disbursement this Period: 35.00

Memo Item

C. ALLEN, DALE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3807 N. BEAVER

City BETHANY State OK Zip Code 73008

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 23 / 2021

FEC Identification Number: C

Transaction ID : B9E0960856

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ALLEN, DALE, , ,		Date of Disbursement MM / DD / YYYY 03 / 23 / 2021	
Mailing Address 3807 N. BEAVER		FEC Identification Number C [REDACTED] Transaction ID : BD4222841D! Amount of Each Disbursement this Period 10.00	
City BETHANY	State OK	Zip Code 73008	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ALVAREZ, ELSA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 42 WEST 138 STREET 42		FEC Identification Number C [REDACTED] Transaction ID : B334293E84A Amount of Each Disbursement this Period 20.00	
City NEW YORK	State NY	Zip Code 10037	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. AMUNDSON, KERRY, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 5658 - 240TH STREET		FEC Identification Number C [REDACTED] Transaction ID : B6F141736B Amount of Each Disbursement this Period 25.00	
City FOREST LAKE	State MN	Zip Code 55025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANADON, JEFFERY, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 17959 PESANTE ROAD		FEC Identification Number C [REDACTED] Transaction ID : B5C701CF41! Amount of Each Disbursement this Period 50.00
City SALINAS	State CA	Zip Code 93907
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ANADON, JEFFERY, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 17959 PESANTE ROAD		FEC Identification Number C [REDACTED] Transaction ID : B782B89DA6! Amount of Each Disbursement this Period 50.00
City SALINAS	State CA	Zip Code 93907
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ANADON, JEFFERY, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 17959 PESANTE ROAD		FEC Identification Number C [REDACTED] Transaction ID : BEED90DDC Amount of Each Disbursement this Period 50.00
City SALINAS	State CA	Zip Code 93907
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ANDERSON, ENID, , ,		Date of Disbursement MM / DD / YYYY 05 / 26 / 2021	
Mailing Address 1171 N MAINE ST		FEC Identification Number C [REDACTED] Transaction ID : BE17FFE378I Amount of Each Disbursement this Period [REDACTED] 100.00	
City WINTERS	State TX	Zip Code 79567	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. ANDERSON, GLENN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 3804 RUNNEBURG RD		FEC Identification Number C [REDACTED] Transaction ID : B4FA1162953 Amount of Each Disbursement this Period [REDACTED] 100.00	
City CROSBY	State TX	Zip Code 77532	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ANDERSON, GLENN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 3804 RUNNEBURG RD		FEC Identification Number C [REDACTED] Transaction ID : B5366E029FI Amount of Each Disbursement this Period [REDACTED] 100.00	
City CROSBY	State TX	Zip Code 77532	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 300.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANNO, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 39 BRANCH BROOK DR

City SMITHTOWN State NY Zip Code 11787

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B5E5D0A25A

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ANTHONY, KAREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 22 WAPPING RD

City KINGSTON State MA Zip Code 02364

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B9C4EE5236I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ANTHONY, KAREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 22 WAPPING RD

City KINGSTON State MA Zip Code 02364

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4E83D7855

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ANTHONY, KAREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 22 WAPPING RD

City KINGSTON State MA Zip Code 02364

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B756739F05E

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ANTHONY, KAREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 22 WAPPING RD

City KINGSTON State MA Zip Code 02364

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B53C33CF5B

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ANTZAS, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3823 E 53RD ST

City TULSA State OK Zip Code 74135

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B2FAE38954

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. APOLAYA, NELLY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3500 NEW YORK AVE		FEC Identification Number C [REDACTED] Transaction ID : B77BD28804 Amount of Each Disbursement this Period 25.00	
City UNION CITY	State NJ	Zip Code 07087	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. ARCHULETA, JEFF, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 801 STAGHORN PL.		FEC Identification Number C [REDACTED] Transaction ID : B923ACF329I Amount of Each Disbursement this Period 50.00	
City FARMINGTON	State NM	Zip Code 87401	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ARMSTRONG, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 695 WALNUT ST		FEC Identification Number C [REDACTED] Transaction ID : B2072ED8F8 Amount of Each Disbursement this Period 10.00	
City ASHLAND	State OR	Zip Code 97520	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶	85.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ASCOWITZ, LESLIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6924 BELMONT SHORE DRIVE

City DELRAY BEACH State FL Zip Code 33446

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B2CAE1B55E

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ASCOWITZ, LESLIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6924 BELMONT SHORE DRIVE

City DELRAY BEACH State FL Zip Code 33446

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B6EA83799B:

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ASCOWITZ, LESLIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6924 BELMONT SHORE DRIVE

City DELRAY BEACH State FL Zip Code 33446

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B32D6A1E06

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ASPLUND, CAROL, , ,		Date of Disbursement MM / DD / YYYY 01 / 15 / 2021	
Mailing Address 12 EXPLORERS WAY		FEC Identification Number C [REDACTED] Transaction ID : BF3CB3C394 Amount of Each Disbursement this Period [REDACTED] 25.00	
City HOLDEN	State MA	Zip Code 01520	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ATON, JAMES, , ,		Date of Disbursement MM / DD / YYYY 01 / 19 / 2021	
Mailing Address 8584 HOLLAND AVE		FEC Identification Number C [REDACTED] Transaction ID : B75E0F7F3FE Amount of Each Disbursement this Period [REDACTED] 25.00	
City SAINT PAUL	State MN	Zip Code 55124	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. AUGUSTINE, KIM, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 12 DUCKHOOK CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : BFAEB9F38E Amount of Each Disbursement this Period [REDACTED] 50.00	
City CLOVER	State SC	Zip Code 29710	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 100.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. AUGUSTINE, KIM, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 12 DUCKHOOK CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B4B55E70CC Amount of Each Disbursement this Period 50.00	
City CLOVER	State SC	Zip Code 29710	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. AUGUSTINE, KIM, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 12 DUCKHOOK CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B77B0686688 Amount of Each Disbursement this Period 50.00	
City CLOVER	State SC	Zip Code 29710	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. AVENI, JOSEPH, T, ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 130 EAGLE POINT DR.		FEC Identification Number C [REDACTED] Transaction ID : BF2A347502 Amount of Each Disbursement this Period 50.00	
City CLEVELAND	State OH	Zip Code 44124	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AVENI, JOSEPH, T, ,

Full Name (Last, First, Middle Initial)

Mailing Address 130 EAGLE POINT DR.

City CLEVELAND State OH Zip Code 44124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BDFD7FA027

Amount of Each Disbursement this Period: 50.00

Memo Item

B. AVENI, JOSEPH, T, ,

Full Name (Last, First, Middle Initial)

Mailing Address 130 EAGLE POINT DR.

City CLEVELAND State OH Zip Code 44124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B0BAD0600C

Amount of Each Disbursement this Period: 50.00

Memo Item

C. AVENI, JOSEPH, T, ,

Full Name (Last, First, Middle Initial)

Mailing Address 130 EAGLE POINT DR.

City CLEVELAND State OH Zip Code 44124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B805A96668

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. AVENI, JOSEPH, T, ,

Full Name (Last, First, Middle Initial)

Mailing Address 130 EAGLE POINT DR.

City CLEVELAND State OH Zip Code 44124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BD67E81708**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. AZIZ, SADIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O BOX 240488

City SAN ANTONIO State TX Zip Code 78224

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B33B14FE44**

Amount of Each Disbursement this Period: 100.00

Memo Item

C. BAECKER, MARTIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1460 HIGHPOINT CT

City ROCHESTER State MI Zip Code 48306

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B985C98E49**

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 160.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BAILEY, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1501 MILL RD

City ELIZABETHTOWN State PA Zip Code 17022

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2021

FEC Identification Number: C

Transaction ID : BF580C540C

Amount of Each Disbursement this Period: 200.00

Memo Item

B. BAILEY, JACKIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5505 NAVAJO RD.

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDEF66E9DD

Amount of Each Disbursement this Period: 25.00

Memo Item

C. BAILEY, VIC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 371 E RIDGEWAY ROAD

City COMMERCE State GA Zip Code 30529

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2021

FEC Identification Number: C

Transaction ID : BAD4284F5E

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 230.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BAILEY, VIC, , ,		Date of Disbursement MM / DD / YYYY 04 / 06 / 2021	
Mailing Address 371 E RIDGEWAY ROAD		FEC Identification Number C [REDACTED] Transaction ID : B4421FC53E	
City COMMERCE	State GA	Zip Code 30529	Amount of Each Disbursement this Period 5.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. BAKER, JOANNE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 141 COPPER BEECH LANE		FEC Identification Number C [REDACTED] Transaction ID : BEE273A44C	
City WOMELSDORF	State PA	Zip Code 19567	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BALDWIN, JASPER, , ,		Date of Disbursement MM / DD / YYYY 02 / 10 / 2021	
Mailing Address P O BOX 590		FEC Identification Number C [REDACTED] Transaction ID : B4A8DDAE8	
City HUNT	State TX	Zip Code 78024	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BALDWIN, JASPER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 590

City HUNT State TX Zip Code 78024

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2021

FEC Identification Number: C

Transaction ID : BA8B811C78

Amount of Each Disbursement this Period: 250.00

Memo Item

B. BALDWIN, JASPER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 590

City HUNT State TX Zip Code 78024

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2021

FEC Identification Number: C

Transaction ID : BB29DC85FD

Amount of Each Disbursement this Period: 250.00

Memo Item

C. BALL, RICHARD, L, ,

Full Name (Last, First, Middle Initial)

Mailing Address 37755 LASKER AVE

City PALMDALE State CA Zip Code 93550

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B00830E52C

Amount of Each Disbursement this Period: 45.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 545.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BANISTER, MARK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6550 E. MIRAMAR DR.

City TUCSON State AZ Zip Code 85715

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : B5408A1194I

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BANISTER, MARK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6550 E. MIRAMAR DR.

City TUCSON State AZ Zip Code 85715

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : B9179D78857

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BANISTER, MARK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6550 E. MIRAMAR DR.

City TUCSON State AZ Zip Code 85715

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : BF980564A3

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BANK, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2 PETER COOPER RD
6G

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B06D7AD0D3

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BARBER, ELENA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1325 S SHERIDAN AV

City SHERIDAN State WY Zip Code 82801

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B5D514CD8B

Amount of Each Disbursement this Period: 35.00

Memo Item

C. BARBER, ELENA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1325 S SHERIDAN AV

City SHERIDAN State WY Zip Code 82801

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B15A985507:

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARCELO, ANGELA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9654 GLENDOWER CT

City LAUREL State MD Zip Code 20723

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BBADAE5B6I

Amount of Each Disbursement this Period: 25.00

Memo Item

B. BARLOW, BARBARA, L, ,

Full Name (Last, First, Middle Initial)

Mailing Address 225 WEST MILL DRIVE

City STOCKBRIDGE State GA Zip Code 30281

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BE9AF2CAB2

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BARLOW, BARBARA, L, ,

Full Name (Last, First, Middle Initial)

Mailing Address 225 WEST MILL DRIVE

City STOCKBRIDGE State GA Zip Code 30281

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BE2B3BC5E1

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARLOW, WILLIAM, R., ,

Full Name (Last, First, Middle Initial)

Mailing Address 1206 HOLLGATE DR

City BALLWIN State MO Zip Code 63021

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BCC55452AA

Amount of Each Disbursement this Period: 5.00

Memo Item

B. BARNES, CHUCK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 422 LOVELACE DR.

City THOMSON State GA Zip Code 30824

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B81B6C5872/

Amount of Each Disbursement this Period: 35.00

Memo Item

C. BARNES, CHUCK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 422 LOVELACE DR.

City THOMSON State GA Zip Code 30824

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B621E29DC/

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARNETT, BETSY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16012 RIVERPOINTE DRIVE

City CHARLOTTE State NC Zip Code 28278

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA292A82DC

Amount of Each Disbursement this Period: 35.00

Memo Item

B. BARRINEAU, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 310 ROUND LAKE ROAD

City PALATKA State FL Zip Code 32177

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BF9A9414324

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BARRINEAU, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 310 ROUND LAKE ROAD

City PALATKA State FL Zip Code 32177

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B5910CC5E3

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BARRY, JOHN, D, ,

Full Name (Last, First, Middle Initial)

Mailing Address 180 ANDOVER ST
21

City ANDOVER State MA Zip Code 01810

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B7289B444A

Amount of Each Disbursement this Period: 35.00

Memo Item

B. BARRY, JOHN, D, ,

Full Name (Last, First, Middle Initial)

Mailing Address 180 ANDOVER ST
21

City ANDOVER State MA Zip Code 01810

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B7538765F0F

Amount of Each Disbursement this Period: 35.00

Memo Item

C. BARRY, JOHN, D, ,

Full Name (Last, First, Middle Initial)

Mailing Address 180 ANDOVER ST
21

City ANDOVER State MA Zip Code 01810

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE5D21A537

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATAL, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16 BALLOU HILL RD

City BERKSHIRE State NY Zip Code 13736

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2021

FEC Identification Number: C

Transaction ID : B8D227AB09

Amount of Each Disbursement this Period: 25.00

Memo Item

B. BATAL, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16 BALLOU HILL RD

City BERKSHIRE State NY Zip Code 13736

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2021

FEC Identification Number: C

Transaction ID : B3015A73796

Amount of Each Disbursement this Period: 25.00

Memo Item

C. BATARSE, ELIZABETH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17037 SW 53RD CT

City MIRAMAR State FL Zip Code 33027

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : B3F3627163I

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BATTLE, DEBBIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2 BRENNAN CT

City AMARILLO State TX Zip Code 79121

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2021

FEC Identification Number: C

Transaction ID : B2F6CB9068!

Amount of Each Disbursement this Period: 35.00

Memo Item

B. BAYER, IRENE, MONIKA, ,

Full Name (Last, First, Middle Initial)

Mailing Address 239 ENCORE BLVD.

City EASTPORT State NY Zip Code 11941

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : B7D64383EE!

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BAYER, IRENE, MONIKA, ,

Full Name (Last, First, Middle Initial)

Mailing Address 239 ENCORE BLVD.

City EASTPORT State NY Zip Code 11941

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : BC91561E46

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BEAVANS, ZENAIDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8835 E. CLOUDVIEW WAY		FEC Identification Number C [REDACTED] Transaction ID : B5DFCE807C Amount of Each Disbursement this Period [REDACTED] 15.00	
City ANAHEIM	State CA	Zip Code 92808	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BEERHORST, NORMAN, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 11301		FEC Identification Number C [REDACTED] Transaction ID : B8E3E657A71 Amount of Each Disbursement this Period [REDACTED] 15.00	
City OSCEOLA	State IN	Zip Code 46561	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. BEHREND, TERRY, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 97 KOKANEE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B8565B40BE Amount of Each Disbursement this Period [REDACTED] 25.00	
City OROVILLE	State CA	Zip Code 95966	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 55.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BELGRAVE, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 907EASTFRONT STREET
A

City PLAINFIELD State NJ Zip Code 07062

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 26 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B9227F7D03
Amount of Each Disbursement this Period: 15.00

Memo Item

B. BENAUR, IRINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 170 CHRISTOPHER DRIVE

City PRINCETON State NJ Zip Code 08540

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B996007A85E
Amount of Each Disbursement this Period: 25.00

Memo Item

C. BENAUR, IRINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 170 CHRISTOPHER DRIVE

City PRINCETON State NJ Zip Code 08540

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : BE3D6671A2
Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BENAUR, IRINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 170 CHRISTOPHER DRIVE

City PRINCETON State NJ Zip Code 08540

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : B80AABDCA

Amount of Each Disbursement this Period: 25.00

Memo Item

B. BENAUR, IRINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 170 CHRISTOPHER DRIVE

City PRINCETON State NJ Zip Code 08540

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : B83DB51C86:

Amount of Each Disbursement this Period: 25.00

Memo Item

C. BENNETT, KENDALL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1222 E DOVER ST

City MESA State AZ Zip Code 85203

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDD6832B12

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BENNETT, KENDALL, , ,		Date of Disbursement MM / DD / YYYY 02 / 04 / 2021
Mailing Address 1222 E DOVER ST		FEC Identification Number C [REDACTED] Transaction ID : BB97D74A88 Amount of Each Disbursement this Period [REDACTED] 20.00
City MESA	State AZ	Zip Code 85203
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BENSON, NANCY, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 3055161 TERRACE NORTH		FEC Identification Number C [REDACTED] Transaction ID : B1B9403392L Amount of Each Disbursement this Period [REDACTED] 15.00
City LOXAHATCHEE	State FL	Zip Code 33470
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BENSON, NANCY, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 3055161 TERRACE NORTH		FEC Identification Number C [REDACTED] Transaction ID : B25598E387 Amount of Each Disbursement this Period [REDACTED] 15.00
City LOXAHATCHEE	State FL	Zip Code 33470
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 50.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BENSON, NANCY, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 3055161 TERRACE NORTH		FEC Identification Number C [REDACTED] Transaction ID : B99D013138f Amount of Each Disbursement this Period [REDACTED] 35.00
City LOXAHATCHEE	State FL	Zip Code 33470
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BENSON, NANCY, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 3055161 TERRACE NORTH		FEC Identification Number C [REDACTED] Transaction ID : B0FE976D34f Amount of Each Disbursement this Period [REDACTED] 15.00
City LOXAHATCHEE	State FL	Zip Code 33470
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BERKA, PAUL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 110 GARDEN PLAZA WAY		FEC Identification Number C [REDACTED] Transaction ID : BB86B7BFE! Amount of Each Disbursement this Period [REDACTED] 50.00
City APEX	State NC	Zip Code 27502
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 100.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BERKHEIMER, MAGGIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7152 HARLEM RD.

City CALEDONIA State IL Zip Code 61011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B5E81E5417

Amount of Each Disbursement this Period: 200.00

Memo Item

B. BERNACKI, DAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2198 HENDERSHOT ROAD

City NORTH LIBERTY State IA Zip Code 52317

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : BAED6CF352

Amount of Each Disbursement this Period: 150.00

Memo Item

C. BERNARDI, ROMANO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10 CENTRAL WAY

City PURDYS State NY Zip Code 10578

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B848F3186D

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BERNARDI, ROMANO, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 10 CENTRAL WAY		FEC Identification Number C [REDACTED] Transaction ID : B796D303DD
City PURDYS	State NY	Zip Code 10578
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BERNARDI, ROMANO, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 10 CENTRAL WAY		FEC Identification Number C [REDACTED] Transaction ID : B0778528866
City PURDYS	State NY	Zip Code 10578
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BERNIER, FRANK, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 2960 CHAMPION WAY 903		FEC Identification Number C [REDACTED] Transaction ID : B994C7608C
City TUSTIN	State CA	Zip Code 92782
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

135.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BESSETTE, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 31723 N 165TH STREET

City SURPRISE State AZ Zip Code 85387

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BB2C0F92D7

Amount of Each Disbursement this Period: 25.00

Memo Item

B. BICKMAN, JIM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4316 UPPER KOGRU DR.

City EAGLE RIVER State AK Zip Code 99577

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B57859484A4

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BICKMAN, JIM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4316 UPPER KOGRU DR.

City EAGLE RIVER State AK Zip Code 99577

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B1D9E070FC

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BIEHLER, TANYA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 619 COUGAR ST SE

City OLYMPIA State WA Zip Code 98503

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BACD1148C2

Amount of Each Disbursement this Period: 10.00

Memo Item

B. BIGBIE, ELEANOR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 439 HIDEAWAY LANE CENTRAL

City HIDEAWAY State TX Zip Code 75771-5203

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B5A2ED32F9I

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BIGBIE, ELEANOR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 439 HIDEAWAY LANE CENTRAL

City HIDEAWAY State TX Zip Code 75771-5203

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B1775F0EA5

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BIGGS, ANNE MARIE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 12322 120TH AVE CT E		FEC Identification Number C [REDACTED] Transaction ID : B86534AC2E Amount of Each Disbursement this Period [REDACTED] 10.00	
City PUYALLUP	State WA	Zip Code 98374	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. BISHOP, JERRY, MACK, ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 3330 S GILBERT RD 1001		FEC Identification Number C [REDACTED] Transaction ID : B061EAAE99 Amount of Each Disbursement this Period [REDACTED] 25.00	
City CHANDLER	State AZ	Zip Code 85286	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. BISHOP, JERRY, MACK, ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 3330 S GILBERT RD 1001		FEC Identification Number C [REDACTED] Transaction ID : BDCEFC3C0 Amount of Each Disbursement this Period [REDACTED] 25.00	
City CHANDLER	State AZ	Zip Code 85286	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 60.00	
TOTAL This Period (last page this line number only)..... ▶		[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BISHOP, JERRY, MACK, ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 3330 S GILBERT RD 1001		FEC Identification Number C [REDACTED] Transaction ID : B45EF9719A Amount of Each Disbursement this Period 25.00	
City CHANDLER	State AZ	Zip Code 85286	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BLACKBURN, AL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1568 HOLCOMB RD		FEC Identification Number C [REDACTED] Transaction ID : B39381E8C4E Amount of Each Disbursement this Period 35.00	
City DAWSONVILLE	State GA	Zip Code 30534	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. BLACK, MJ, , ,		Date of Disbursement MM / DD / YYYY 01 / 21 / 2021	
Mailing Address 2365 RAINTREE DR		FEC Identification Number C [REDACTED] Transaction ID : B27F67ECE9 Amount of Each Disbursement this Period 15.00	
City BREA	State CA	Zip Code 92821	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLACK, MJ, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2365 RAINTREE DR

City BREA State CA Zip Code 92821

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2021

FEC Identification Number: C

Transaction ID : **BF17415B30**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. BLACK, MJ, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2365 RAINTREE DR

City BREA State CA Zip Code 92821

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2021

FEC Identification Number: C

Transaction ID : **B3D89B9908**

Amount of Each Disbursement this Period: 15.00

Memo Item

C. BLAHA, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16518 CLIFTON BLVD

City LAKEWOOD State OH Zip Code 44107

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BC725205AE**

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLANK, SHELLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 OCEAN ROYALE WAY APT 1103

City NORTH PALM BEACH State FL Zip Code 33408

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : **BBC41C1A89**

Amount of Each Disbursement this Period: 5.00

Memo Item

B. BLASCAK, JOHN, P, , SR

Full Name (Last, First, Middle Initial)

Mailing Address 7 PATTON DRIVE

City NEWPORT NEWS State VA Zip Code 23606

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B262387935A**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. BLASCAK, JOHN, P, , SR

Full Name (Last, First, Middle Initial)

Mailing Address 7 PATTON DRIVE

City NEWPORT NEWS State VA Zip Code 23606

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B811DAAF78**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLASER, BETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2142 SUN RISE ST.

City EMMETT State ID Zip Code 83617

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B8C86F4024f

Amount of Each Disbursement this Period: 35.00

Memo Item

B. BLAU, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6948 N ASHLAND BLVD
APT 3A

City CHICAGO State IL Zip Code 60626

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : B32FFEB69Bf

Amount of Each Disbursement this Period: 5.00

Memo Item

C. BLESSING, W SCOTT, , , MD

Full Name (Last, First, Middle Initial)

Mailing Address 5305 SOUTHERN AVE

City DALLAS State TX Zip Code 75209

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B01BD33EAf

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

55.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BLOODWORTH, JANICE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9422 BARLEY MILLS RD

City LAKELAND State TN Zip Code 38002

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B92026564Cf

Amount of Each Disbursement this Period: 10.00

Memo Item

B. BOONE, MIMI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 60 GRAND BEACH BLVD.

City GALVESTON State TX Zip Code 77550

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C

Transaction ID : BEA856CB0E

Amount of Each Disbursement this Period: 100.00

Memo Item

C. BOOTH, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 19548 TULSA ST

City PORTER RANCH State CA Zip Code 91326

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B1A854DE5E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 160.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOOTH, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 19548 TULSA ST

City PORTER RANCH State CA Zip Code 91326

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : BA72ECE963

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BOQUIST, TERESA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 114 HILLCREST RD

City MARTINEZ State GA Zip Code 30907

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 05 / 2021

FEC Identification Number: C

Transaction ID : B79A4FB340

Amount of Each Disbursement this Period: 15.00

Memo Item

C. BORDELON, JERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 200 HUGGIS RD.

City LAFAYETTE State LA Zip Code 70506

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : BE6CF24B07

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 265.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input checked="" type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BORKEM-HAGEN, WACLAW, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 658 IRWIN STREET

City SAN RAFAEL State CA Zip Code 94901

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 04 / 2021

FEC Identification Number: C
Transaction ID : B7A735B268I

Amount of Each Disbursement this Period: 35.00

Memo Item

B. BOSCO, ADA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10395 STONEBRIDGE BLVD

City BOCA RATON State FL Zip Code 33498-6406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 04 / 2021

FEC Identification Number: C
Transaction ID : B86834A327A

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BOUCH, JOE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1580 THORNHILL CIRCLE

City OVIEDO State FL Zip Code 32765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 24 / 2021

FEC Identification Number: C
Transaction ID : BB8BE58C4I

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BOVE, ROSE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 640 TOMPKINS AVE		FEC Identification Number C [REDACTED] Transaction ID : B8BA289513 Amount of Each Disbursement this Period 5.00
City STATEN ISLAND	State NY	Zip Code 10305
Purpose of Disbursement REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BOWERS, BONNIE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 71 VILLAS CIR		FEC Identification Number C [REDACTED] Transaction ID : B8BDECA980 Amount of Each Disbursement this Period 35.00
City LITTLE ROCK	State AR	Zip Code 72223
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BOWERS, WILLIAM, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 2700 N. PENINSULA AVE 223		FEC Identification Number C [REDACTED] Transaction ID : B64238DF19 Amount of Each Disbursement this Period 35.00
City NEW SMYRNA BEACH	State FL	Zip Code 32169
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BOWLER, WOSSENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 91 WEST 100 SOUTH

City SUMMIT State UT Zip Code 84772

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2AD15DE21

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BOWLER, WOSSENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 91 WEST 100 SOUTH

City SUMMIT State UT Zip Code 84772

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BD92D83F9A

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BOWLER, WOSSENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 91 WEST 100 SOUTH

City SUMMIT State UT Zip Code 84772

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BCFE9A66F1

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BOWLER, WOSSENE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 91 WEST 100 SOUTH		FEC Identification Number C [REDACTED] Transaction ID : B0538D5EF7 Amount of Each Disbursement this Period 50.00	
City SUMMIT	State UT	Zip Code 84772	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BOWMAN, MIKE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 34124 1ST PL S D D		FEC Identification Number C [REDACTED] Transaction ID : BFDA6704B9 Amount of Each Disbursement this Period 6.00	
City FEDERAL WAY	State WA	Zip Code 98003	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. BOWMAN, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 4662 NOTRE DAME AVE		FEC Identification Number C [REDACTED] Transaction ID : B995D2E2A2 Amount of Each Disbursement this Period 25.00	
City STEVENSVILLE	State MI	Zip Code 49127	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	81.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BOWMAN, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 4662 NOTRE DAME AVE		FEC Identification Number C [REDACTED] Transaction ID : B964FC51F9 Amount of Each Disbursement this Period 25.00	
City STEVENSVILLE	State MI	Zip Code 49127	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. BOWMAN, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 4662 NOTRE DAME AVE		FEC Identification Number C [REDACTED] Transaction ID : B8CAED70B3 Amount of Each Disbursement this Period 25.00	
City STEVENSVILLE	State MI	Zip Code 49127	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BRADY, LYNN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8801 NORTH BRYANT AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BAE950C763 Amount of Each Disbursement this Period 50.00	
City OKLAHOMA CITY	State OK	Zip Code 73131	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

100.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BRADY, LYNN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8801 NORTH BRYANT AVENUE

City OKLAHOMA CITY State OK Zip Code 73131

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B01A26B48A

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BRANDT, KIMBERLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 803 OYSTER SHELL DRIVE

City SUNSET BEACH State NC Zip Code 28468

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B067FDCE69I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. BRANDT, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2470 SW 19 TERRACE

City MIAMI State FL Zip Code 33245

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B13886DA98

Amount of Each Disbursement this Period: 12.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 87.50

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BRAWLEY, EMERY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 249 CANTER WAY		FEC Identification Number C [REDACTED] Transaction ID : BE8529C12E: Amount of Each Disbursement this Period [REDACTED] 50.00	
City ALABASTER	State AL	Zip Code 35007	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. BRAWLEY, EMERY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 249 CANTER WAY		FEC Identification Number C [REDACTED] Transaction ID : B4F5D270604 Amount of Each Disbursement this Period [REDACTED] 100.00	
City ALABASTER	State AL	Zip Code 35007	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. BRILL, ROGER, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 6417 SW 35TH WAY		FEC Identification Number C [REDACTED] Transaction ID : B5C58C1891 Amount of Each Disbursement this Period [REDACTED] 35.00	
City GAINESVILLE	State FL	Zip Code 32608	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 185.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BROMWELL, PAMELA, , MS,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 2121 DON AVE		FEC Identification Number C [REDACTED] Transaction ID : BA658719ED	
City WESTMINSTER	State MD	Zip Code 21157	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. BROMWELL, PAMELA, , MS,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 2121 DON AVE		FEC Identification Number C [REDACTED] Transaction ID : B12E4DE189	
City WESTMINSTER	State MD	Zip Code 21157	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BROMWELL, PAMELA, , MS,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 2121 DON AVE		FEC Identification Number C [REDACTED] Transaction ID : B4BADB66C	
City WESTMINSTER	State MD	Zip Code 21157	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BROMWELL, PAMELA, , MS,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 2121 DON AVE		FEC Identification Number C [REDACTED] Transaction ID : B8101DBD09 Amount of Each Disbursement this Period 25.00	
City WESTMINSTER	State MD	Zip Code 21157	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BROMWELL, PAMELA, , MS,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2121 DON AVE		FEC Identification Number C [REDACTED] Transaction ID : BA94F4C739F Amount of Each Disbursement this Period 25.00	
City WESTMINSTER	State MD	Zip Code 21157	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. BROWN, DIOROTHY, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 2662 BLEILER HILL ROAD		FEC Identification Number C [REDACTED] Transaction ID : BECABA6CE Amount of Each Disbursement this Period 10.00	
City NEW TRIPOLI	State PA	Zip Code 18066	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BROWN, GUY, , ,			Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 180 WEBB AVENUE				
City RIVER EDGE	State NJ	Zip Code 07661	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : B797EC04AF Amount of Each Disbursement this Period [REDACTED] 50.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____ District: _____				
Full Name (Last, First, Middle Initial) B. BROWN, GUY, , ,			Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 180 WEBB AVENUE				
City RIVER EDGE	State NJ	Zip Code 07661	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : B8DF832E13C Amount of Each Disbursement this Period [REDACTED] 50.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____				
Full Name (Last, First, Middle Initial) C. BROWN, GUY, , ,			Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 180 WEBB AVENUE				
City RIVER EDGE	State NJ	Zip Code 07661	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : B925228512Z Amount of Each Disbursement this Period [REDACTED] 50.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 150.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROWN, GUY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 180 WEBB AVENUE

City RIVER EDGE State NJ Zip Code 07661

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDD55B150E

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BROWN, LEO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1411 CORA MARIE COVE

City PFLUGERVILLE State TX Zip Code 78660

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B821464343B

Amount of Each Disbursement this Period: 35.00

Memo Item

C. BROWN, LEO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1411 CORA MARIE COVE

City PFLUGERVILLE State TX Zip Code 78660

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BAEDA707A

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BROWN, MARY KAY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 9067 TAPPER ST		FEC Identification Number C [REDACTED] Transaction ID : B6F470211D Amount of Each Disbursement this Period [REDACTED] 35.00	
City SAINT JOHN	State IN	Zip Code 46373	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. BROWN, MARY KAY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 9067 TAPPER ST		FEC Identification Number C [REDACTED] Transaction ID : BBF853B93FI Amount of Each Disbursement this Period [REDACTED] 35.00	
City SAINT JOHN	State IN	Zip Code 46373	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. BROWN, MARY KAY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 9067 TAPPER ST		FEC Identification Number C [REDACTED] Transaction ID : B1A04C5837 Amount of Each Disbursement this Period [REDACTED] 35.00	
City SAINT JOHN	State IN	Zip Code 46373	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BROWN, RENEE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 70 OLD HART RD		FEC Identification Number C [REDACTED] Transaction ID : B0FE93E18C Amount of Each Disbursement this Period 20.00	
City BARRINGTON	State IL	Zip Code 60010	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BROWN, RONALD, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 11303 BUSINESS PARK BLVD		FEC Identification Number C [REDACTED] Transaction ID : B2AE1FE0DE Amount of Each Disbursement this Period 35.00	
City JACKSONVILLE	State FL	Zip Code 32256	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. BROWN, THOMAS, C., ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2508 VERDE AVE.		FEC Identification Number C [REDACTED] Transaction ID : BB2EC513C! Amount of Each Disbursement this Period 15.00	
City ODESSA	State TX	Zip Code 79761	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BROWN, THOMAS, C., ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2508 VERDE AVE.		FEC Identification Number C [REDACTED] Transaction ID : B72293BE69 Amount of Each Disbursement this Period 15.00	
City ODESSA	State TX	Zip Code 79761	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. BROWN, THOMAS, C., ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2508 VERDE AVE.		FEC Identification Number C [REDACTED] Transaction ID : BA83357278E Amount of Each Disbursement this Period 15.00	
City ODESSA	State TX	Zip Code 79761	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BROZAK, DENNIS, , ,		Date of Disbursement MM / DD / YYYY 03 / 15 / 2021	
Mailing Address 2008 STATE HWY M-69		FEC Identification Number C [REDACTED] Transaction ID : BDCE5ECAC Amount of Each Disbursement this Period 50.00	
City CRYSTAL FALLS	State MI	Zip Code 49920	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BROZAK, DENNIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2008 STATE HWY M-69

City CRYSTAL FALLS State MI Zip Code 49920

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : B1924DCE85

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BROZAK, DENNIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2008 STATE HWY M-69

City CRYSTAL FALLS State MI Zip Code 49920

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BCE2A2A803

Amount of Each Disbursement this Period: 50.00

Memo Item

C. BROZAK, DENNIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2008 STATE HWY M-69

City CRYSTAL FALLS State MI Zip Code 49920

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4477E514F

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BRUSENHAN, ALICIA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 501 ELIZABETH ROAD		FEC Identification Number C [REDACTED] Transaction ID : BC80D68D4D Amount of Each Disbursement this Period 100.00	
City SAN ANTONIO	State TX	Zip Code 78209	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. BRUSENHAN, ALICIA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 501 ELIZABETH ROAD		FEC Identification Number C [REDACTED] Transaction ID : B4AC8693674 Amount of Each Disbursement this Period 100.00	
City SAN ANTONIO	State TX	Zip Code 78209	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. BRUSENHAN, ALICIA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 501 ELIZABETH ROAD		FEC Identification Number C [REDACTED] Transaction ID : B6E67236784 Amount of Each Disbursement this Period 100.00	
City SAN ANTONIO	State TX	Zip Code 78209	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUCHHOLZ, IDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 605 E IOWA ST

City RAPID CITY State SD Zip Code 57701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2021

FEC Identification Number: C

Transaction ID : B666F5059F2

Amount of Each Disbursement this Period: 25.00

Memo Item

B. BULF, RENEE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11483 RIDGE RD

City NEVADA CITY State CA Zip Code 95959

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B4B4B6C35B

Amount of Each Disbursement this Period: 150.00

Memo Item

C. BUNCH, ANTHONY, Q., MR,

Full Name (Last, First, Middle Initial)

Mailing Address 4306 GREEN VALLEY TRAIL

City ATLANTA State MI Zip Code 49709

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B79F198469t

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BUONAIUTO, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1385 HIGH POINT BLVD WEST
B

City DELRAY BEACH State FL Zip Code 33445

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C
Transaction ID : B4A680D198
Amount of Each Disbursement this Period: 15.00

Memo Item

B. BUONAIUTO, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1385 HIGH POINT BLVD WEST
B

City DELRAY BEACH State FL Zip Code 33445

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C
Transaction ID : B969243E2D5
Amount of Each Disbursement this Period: 15.00

Memo Item

C. BURDICK, AMY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9821 VERRENE LN

City RENO State NV Zip Code 89521

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C
Transaction ID : B61F286EC1
Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURGESS, FRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 713 GALLOWAY DR SE

City LEESBURG State VA Zip Code 20175

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1109118379

Amount of Each Disbursement this Period: 100.00

Memo Item

B. BURKE, JAMIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 416 WOODSIDE DR

City HARRISBURG State NC Zip Code 28075

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C

Transaction ID : BC80524A16f

Amount of Each Disbursement this Period: 35.00

Memo Item

C. BURKE, JAMIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 416 WOODSIDE DR

City HARRISBURG State NC Zip Code 28075

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C

Transaction ID : BFE54C27F3

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 170.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BURTUM, RON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 613 W 47TH PL

City SAND SPRINGS State OK Zip Code 74063

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 28 / 2021

FEC Identification Number: C

Transaction ID : B5FF116E59/

Amount of Each Disbursement this Period: 50.00

Memo Item

B. BYLER, CAROL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 905 BILL WATKINS RD

City HOSCHTON State GA Zip Code 30548

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA66F381175

Amount of Each Disbursement this Period: 35.00

Memo Item

C. BYRD, REBA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24505 ALDINEWESTFIELD 1117

City SPRING State TX Zip Code 77373

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B9794475FB

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. BYRD, REBA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24505 ALDINEWESTFIELD
1117

City SPRING State TX Zip Code 77373

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : B05FAC7ADf

Amount of Each Disbursement this Period: 35.00

Memo Item

B. BYRD, REBA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24505 ALDINEWESTFIELD
1117

City SPRING State TX Zip Code 77373

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6965E34964

Amount of Each Disbursement this Period: 35.00

Memo Item

C. BYTHEWAY, CRYSTAL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2866 KADOTA STREET

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B1EF7E4264

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. BYTHEWAY, CRYSTAL, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 2866 KADOTA STREET		FEC Identification Number C [REDACTED] Transaction ID : BAF10F3C2D Amount of Each Disbursement this Period 50.00
City SIMI VALLEY	State CA	Zip Code 93063
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CADENAS, BETH, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 789 RUXSHIRE DR		FEC Identification Number C [REDACTED] Transaction ID : BD0E96886D! Amount of Each Disbursement this Period 35.00
City ARNOLD	State MD	Zip Code 21012
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CAIAFA, CAESAR, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 331 W QUAIL DR.		FEC Identification Number C [REDACTED] Transaction ID : B51E375E6E Amount of Each Disbursement this Period 10.00
City MARMORA	State NJ	Zip Code 08223
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CALIENDO, THOMAS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 323 LINE ROAD		FEC Identification Number C [REDACTED] Transaction ID : B4B994D18F. Amount of Each Disbursement this Period [REDACTED] 15.00	
City MATAWAN	State NJ	Zip Code 07747	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. CALTABIANO, FRANK, , ,		Date of Disbursement MM / DD / YYYY 06 / 03 / 2021	
Mailing Address 119 CHIMNEY ROCK LN		FEC Identification Number C [REDACTED] Transaction ID : B2FAED625C Amount of Each Disbursement this Period [REDACTED] 20.00	
City FORT MILL	State SC	Zip Code 29708	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. CAMPBELL, CARL, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 770 BROOME RD 144		FEC Identification Number C [REDACTED] Transaction ID : BE8F8C5C1E Amount of Each Disbursement this Period [REDACTED] 10.00	
City KNOXVILLE	State TN	Zip Code 37909	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 45.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CAMPBELL, JEANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2156 US HIGHWAY 166

City CANEY State KS Zip Code 67333

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BD1963B216**

Amount of Each Disbursement this Period: 10.00

Memo Item

B. CAMPBELL, PHILIP, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8337 DUVAL DR

City PORT RICHEY State FL Zip Code 34668

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : **B8AA6970B7**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. CARAMES PETLICK, MARIA, , MRS,

Full Name (Last, First, Middle Initial)

Mailing Address 10660 OLD SAINT AUGUSTINE RD
APT 611

City JACKSONVILLE State FL Zip Code 32257

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BE17B35A1F**

Amount of Each Disbursement this Period: 30.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 90.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARAMES PETLICK, MARIA, , MRS,

Full Name (Last, First, Middle Initial)

Mailing Address 10660 OLD SAINT AUGUSTINE RD
APT 611

City JACKSONVILLE State FL Zip Code 32257

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C
Transaction ID : B9FFFD4FA3
Amount of Each Disbursement this Period: 30.00

Memo Item

B. CAREY, DEBRA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2009 EAST 49TH AVENUE

City SPOKANE State WA Zip Code 99223

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C
Transaction ID : BABFB22704
Amount of Each Disbursement this Period: 100.00

Memo Item

C. CARLSON, ARDYS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 610 HIGHWAY 9 NE

City NEW LONDON State MN Zip Code 56273

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 09 / 2021

FEC Identification Number: C
Transaction ID : BC4F11B243
Amount of Each Disbursement this Period: 40.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 170.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CARNEY, MARK, , ,		Date of Disbursement MM / DD / YYYY 03 / 22 / 2021	
Mailing Address 33130 S SPRING BAY RD		FEC Identification Number C [REDACTED] Transaction ID : B02303C4742	
City DE TOUR VILLAGE	State MI	Zip Code 49725	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. CAROL, TRAYLOR, , ,		Date of Disbursement MM / DD / YYYY 03 / 22 / 2021	
Mailing Address 3017 ROCKFORD FALLS DR S		FEC Identification Number C [REDACTED] Transaction ID : B9EFAE828E	
City JACKSONVILLE	State FL	Zip Code 32224	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. CAROL, TRAYLOR, , ,		Date of Disbursement MM / DD / YYYY 03 / 22 / 2021	
Mailing Address 3017 ROCKFORD FALLS DR S		FEC Identification Number C [REDACTED] Transaction ID : B481039DF9	
City JACKSONVILLE	State FL	Zip Code 32224	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARPENTER, JANET, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4335 LAKESHORE FOREST DR.

City MISSOURI CITY State TX Zip Code 77459

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BBBC374A5E**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. CARPENTER, JANET, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4335 LAKESHORE FOREST DR.

City MISSOURI CITY State TX Zip Code 77459

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BF6C9136105**

Amount of Each Disbursement this Period: 15.00

Memo Item

C. CARPENTER, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 74 HUNTER LN

City BRIGHTWOOD State VA Zip Code 22715

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B846E7F382I**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CARPENTER, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 74 HUNTER LN		FEC Identification Number C [REDACTED] Transaction ID : B0ADA22AA: Amount of Each Disbursement this Period [REDACTED] 25.00	
City BRIGHTWOOD	State VA	Zip Code 22715	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____ District: _____			
Full Name (Last, First, Middle Initial) B. CARPENTER, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 74 HUNTER LN		FEC Identification Number C [REDACTED] Transaction ID : B1D0D99D3B Amount of Each Disbursement this Period [REDACTED] 25.00	
City BRIGHTWOOD	State VA	Zip Code 22715	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____ District: _____			
Full Name (Last, First, Middle Initial) C. CARPENTER, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 74 HUNTER LN		FEC Identification Number C [REDACTED] Transaction ID : BE07D21968 Amount of Each Disbursement this Period [REDACTED] 25.00	
City BRIGHTWOOD	State VA	Zip Code 22715	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: _____ District: _____			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 75.00	
TOTAL This Period (last page this line number only)..... ▶		[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CARSON, EDWARD, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 1720 CANYONLANDS WAY		FEC Identification Number C [REDACTED] Transaction ID : B8F5F050D0! Amount of Each Disbursement this Period [REDACTED] 35.00
City RENO	State NV	Zip Code 89521
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CARTER, DEBRA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 5100 LONGWOOD CT		FEC Identification Number C [REDACTED] Transaction ID : B0AC02D341! Amount of Each Disbursement this Period [REDACTED] 50.00
City PLANO	State TX	Zip Code 75093
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CARTER, DEBRA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 5100 LONGWOOD CT		FEC Identification Number C [REDACTED] Transaction ID : B9FA5B48D! Amount of Each Disbursement this Period [REDACTED] 50.00
City PLANO	State TX	Zip Code 75093
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 135.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CARTER, PATRICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 40 PALATINE APT 313

City IRVINE State CA Zip Code 92613

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : **BD8ECCB96f**

Amount of Each Disbursement this Period: 100.00

Memo Item

B. CARTER, PATRICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 40 PALATINE APT 313

City IRVINE State CA Zip Code 92613

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : **BF4A99F451f**

Amount of Each Disbursement this Period: 100.00

Memo Item

C. CARTER, PATRICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 40 PALATINE APT 313

City IRVINE State CA Zip Code 92613

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : **BFF7306C16f**

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CASEBEER, JAMES, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2021	
Mailing Address 116 SW 45TH STREET		FEC Identification Number C [REDACTED] Transaction ID : B91E4208B4I Amount of Each Disbursement this Period [REDACTED] 35.00	
City LAWTON	State OK	Zip Code 73505	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. CASTRO, KRISTY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5604 SUNDANCE DR		FEC Identification Number C [REDACTED] Transaction ID : B6EF7267A4I Amount of Each Disbursement this Period [REDACTED] 25.00	
City THE COLONY	State TX	Zip Code 75056	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. CASTRO, KRISTY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5604 SUNDANCE DR		FEC Identification Number C [REDACTED] Transaction ID : B8E602CDBI Amount of Each Disbursement this Period [REDACTED] 25.00	
City THE COLONY	State TX	Zip Code 75056	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 85.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CASTRO, KRISTY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5604 SUNDANCE DR		FEC Identification Number C [REDACTED] Transaction ID : B40C44C934I Amount of Each Disbursement this Period 25.00	
City THE COLONY	State TX	Zip Code 75056	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. CAVALLARO, CHRISTOPHER, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 234 MEADOW NECK RD.		FEC Identification Number C [REDACTED] Transaction ID : BFE8914BB7: Amount of Each Disbursement this Period 100.00	
City EAST FALMOUTH	State MA	Zip Code 02536	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. CERBONE, DON, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7 EAST HAMILTON AVE		FEC Identification Number C [REDACTED] Transaction ID : B1A323CCF5 Amount of Each Disbursement this Period 100.00	
City MASSAPEQUA	State NY	Zip Code 11758	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CERBONE, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7 EAST HAMILTON AVE

City MASSAPEQUA State NY Zip Code 11758

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BB88B8ABBI**

Amount of Each Disbursement this Period: 100.00

Memo Item

B. CHAMBERLIN, MARCIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6315 MYSTIC VIEW DRIVE

City GAYLORD State MI Zip Code 49735

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2021

FEC Identification Number: C

Transaction ID : **B4572EC24DI**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. CHAMBERLIN, MARCIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6315 MYSTIC VIEW DRIVE

City GAYLORD State MI Zip Code 49735

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2021

FEC Identification Number: C

Transaction ID : **B7A3C1BB0I**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHAPLIN, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 39774 GOLFERS DRIVE

City PALMDALE State CA Zip Code 93551

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B873395F9F5

Amount of Each Disbursement this Period: 25.00

Memo Item

B. CHAPLIN, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 39774 GOLFERS DRIVE

City PALMDALE State CA Zip Code 93551

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BAE3648862f

Amount of Each Disbursement this Period: 25.00

Memo Item

C. CHASE, MARC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1012 ROLLING GLEN DR

City MARION State IA Zip Code 52302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B665631A87

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CHAVARRIA, JOHN, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 4910 MOKRY DRUVE		FEC Identification Number C [REDACTED] Transaction ID : B25FBD0A32 Amount of Each Disbursement this Period [REDACTED] 250.00	
City CORPUS CHRISTI	State TX	Zip Code 78415	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. CHAVARRIA, JOHN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4910 MOKRY DRUVE		FEC Identification Number C [REDACTED] Transaction ID : BB6EF4410C Amount of Each Disbursement this Period [REDACTED] 250.00	
City CORPUS CHRISTI	State TX	Zip Code 78415	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. CHAVARRIA, JOHN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4910 MOKRY DRUVE		FEC Identification Number C [REDACTED] Transaction ID : B049D566B6 Amount of Each Disbursement this Period [REDACTED] 250.00	
City CORPUS CHRISTI	State TX	Zip Code 78415	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 750.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHAVARRIA, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4910 MOKRY DRUVE

City CORPUS CHRISTI State TX Zip Code 78415

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B22651C9F4

Amount of Each Disbursement this Period: 250.00

Memo Item

B. CHAVEZ, DEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 207217 EAST 10TH AVENUE

City KENNEWICK State WA Zip Code 99337

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2021

FEC Identification Number: C

Transaction ID : B0EC15981D

Amount of Each Disbursement this Period: 50.00

Memo Item

C. CHAVEZ, DEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 207217 EAST 10TH AVENUE

City KENNEWICK State WA Zip Code 99337

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2021

FEC Identification Number: C

Transaction ID : B9B16947E6

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHELBERG, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 100 LAKESHORE DR. APT. 1551

City NORTH PALM BEACH State FL Zip Code 33408

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BB07939134E**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. CHESTER, JANIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 49 HAZEL ROAD

City DOVER State DE Zip Code 19901

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 26 / 2021

FEC Identification Number: C

Transaction ID : **BE26D4EB75E**

Amount of Each Disbursement this Period: 36.00

Memo Item

C. CHIONG, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1400 SW 124 TERRACE APT Q 108

City HOLLYWOOD State FL Zip Code 33027

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B23F60456D**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 96.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CHIONG, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1400 SW 124 TERRACE APT Q 108

City HOLLYWOOD State FL Zip Code 33027

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B840B33B34

Amount of Each Disbursement this Period: 35.00

Memo Item

B. CHIONG, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1400 SW 124 TERRACE APT Q 108

City HOLLYWOOD State FL Zip Code 33027

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B3EEE79F3A

Amount of Each Disbursement this Period: 35.00

Memo Item

C. CHIONG, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1400 SW 124 TERRACE APT Q 108

City HOLLYWOOD State FL Zip Code 33027

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6834F6E1C

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CHITU, LESLIE, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 116 DUBBS LANE		FEC Identification Number C [REDACTED] Transaction ID : BD4C59F926i Amount of Each Disbursement this Period 50.00	
City BUTLER	State PA	Zip Code 16001	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. CHRISTENSEN, CAREN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 2330 TURNBERRY CT F		FEC Identification Number C [REDACTED] Transaction ID : B7641D8066F Amount of Each Disbursement this Period 20.00	
City BELOIT	State WI	Zip Code 53511	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. CHUNN, ANNE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 440 SCHLATER RD		FEC Identification Number C [REDACTED] Transaction ID : B764D0B07F Amount of Each Disbursement this Period 40.00	
City COLUMBUS	State MS	Zip Code 39701	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CLANCY, TERRY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 4832 HILLEGAS ROAD		FEC Identification Number C [REDACTED] Transaction ID : B908381AC9
City FORT WAYNE	State IN	Zip Code 46818
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CLARK, DONALD, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021
Mailing Address 992 SIRUS TRAIL		FEC Identification Number C [REDACTED] Transaction ID : B73ED5120E
City SARASOTA	State FL	Zip Code 34232
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CLARK, LINDA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 450 CLARK ST		FEC Identification Number C [REDACTED] Transaction ID : BA7CDBC0F
City OVIEDO	State FL	Zip Code 32765
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

125.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLARK, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 450 CLARK ST

City OVIEDO State FL Zip Code 32765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BAD4508AB5**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. CLARK, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 450 CLARK ST

City OVIEDO State FL Zip Code 32765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BF70EAC226:**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. CLARK, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7339 FAIR HAVEN RD

City HOMER State NY Zip Code 13077

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B52059A0DE**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CLARK, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7339 FAIR HAVEN RD

City HOMER State NY Zip Code 13077

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B0CA2034A0

Amount of Each Disbursement this Period: 35.00

Memo Item

B. CLARK, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7339 FAIR HAVEN RD

City HOMER State NY Zip Code 13077

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BAA6C57926

Amount of Each Disbursement this Period: 35.00

Memo Item

C. CLEAVER, FRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4889 SOUTH SALINA STREET

City SYRACUSE State NY Zip Code 13205

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B93A3C029C

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CLEAVER, FRED, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 4889 SOUTH SALINA STREET		FEC Identification Number C [REDACTED] Transaction ID : B5CF2B9F7C Amount of Each Disbursement this Period 25.00	
City SYRACUSE	State NY	Zip Code 13205	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CLEAVER, FRED, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 4889 SOUTH SALINA STREET		FEC Identification Number C [REDACTED] Transaction ID : B33E0800B7F Amount of Each Disbursement this Period 25.00	
City SYRACUSE	State NY	Zip Code 13205	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CLEVENGER, DONNA, , ,		Date of Disbursement MM / DD / YYYY 05 / 08 / 2021	
Mailing Address 12325 SW KING RICHARD DR		FEC Identification Number C [REDACTED] Transaction ID : BD1AA05A5I Amount of Each Disbursement this Period 50.00	
City KING CITY	State OR	Zip Code 97224	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CLINTON, VIVIAN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 36 ELCHESTER DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B160046E4F Amount of Each Disbursement this Period 25.00
City EAST NORTHPORT	State NY	Zip Code 11731-5607
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. CLOER, CALVIN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address P.O. BOX 2		FEC Identification Number C [REDACTED] Transaction ID : BFD86156553 Amount of Each Disbursement this Period 25.00
City PEA RIDGE	State AR	Zip Code 72751
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. COCHRAN, GUY, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 900 COCHRAN FARM RD		FEC Identification Number C [REDACTED] Transaction ID : BF10264B36 Amount of Each Disbursement this Period 150.00
City DUBLIN	State GA	Zip Code 31021-1426
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COFFEE, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2736 FOX GLENN CT.

City HURST State TX Zip Code 76054

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BBA9B3E3B!

Amount of Each Disbursement this Period: 25.00

Memo Item

B. COFFER, NORMA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4176 BEATTY DR.

City RIVERSIDE State CA Zip Code 92506

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : B15543501CC

Amount of Each Disbursement this Period: 50.00

Memo Item

C. COLLIER, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 110 WHEELWRIGHT LANE

City PONTE VEDRA State FL Zip Code 32081

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BBA7475DE;

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLLIER, JEFF, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3957 COUNTY RD. 730

City CULLMAN State AL Zip Code 35055

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B6729434300

Amount of Each Disbursement this Period: 25.00

Memo Item

B. COLLIER, JEFF, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3957 COUNTY RD. 730

City CULLMAN State AL Zip Code 35055

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B33177C07Bf

Amount of Each Disbursement this Period: 50.00

Memo Item

C. COLLINGS, TERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4745 DEVONPORT CIRCLE

City YORBA LINDA State CA Zip Code 92887

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BE68587977f

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. COLLINGS, TERRY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 4745 DEVONPORT CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B324F9C52B Amount of Each Disbursement this Period 50.00
City YORBA LINDA	State CA	Zip Code 92887
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. COLLINGS, TERRY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 4745 DEVONPORT CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : BE87DABC16 Amount of Each Disbursement this Period 50.00
City YORBA LINDA	State CA	Zip Code 92887
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. COLLINS, MARGARET, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 7176 QUAY RD J		FEC Identification Number C [REDACTED] Transaction ID : B10BE679F6 Amount of Each Disbursement this Period 25.00
City SAN JON	State NM	Zip Code 88434-9749
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶	125.00
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COLTON, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17 HEARNLEE PLACE

City WHEELING State WV Zip Code 26003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BB1149A2BC**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. COOK, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 701 ELKINS LK

City HUNTSVILLE State TX Zip Code 77340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2021

FEC Identification Number: C

Transaction ID : **B951ED60755**

Amount of Each Disbursement this Period: 5.00

Memo Item

C. COOK, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 701 ELKINS LK

City HUNTSVILLE State TX Zip Code 77340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2021

FEC Identification Number: C

Transaction ID : **BEE630E004**

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COOK, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 701 ELKINS LK

City HUNTSVILLE State TX Zip Code 77340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2021

FEC Identification Number: C

Transaction ID : B7093EDC4E

Amount of Each Disbursement this Period: 5.00

Memo Item

B. COPELAND, ALFRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 341314

City MEMPHIS State TN Zip Code 38184

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B198FDBE44I

Amount of Each Disbursement this Period: 100.00

Memo Item

C. COPELAND, ALFRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 341314

City MEMPHIS State TN Zip Code 38184

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BC15CC55C;

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 205.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COPELAND, ALFRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 341314

City MEMPHIS State TN Zip Code 38184

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : **BB9CD116A8**

Amount of Each Disbursement this Period: 100.00

Memo Item

B. COPELAND, ALFRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 341314

City MEMPHIS State TN Zip Code 38184

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : **BF40CF9E0D**

Amount of Each Disbursement this Period: 100.00

Memo Item

C. CORBETT, RONALD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7948 SIDING CT.

City GROSSE ILE State MI Zip Code 48138

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : **B6C91D23C4**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CORBETT, RONALD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7948 SIDING CT.

City GROSSE ILE State MI Zip Code 48138

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC48C19D01

Amount of Each Disbursement this Period: 50.00

Memo Item

B. CORTESE, STEVEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4701 SYCAMORE DRIVE

City YPSILANTI State MI Zip Code 48197

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 05 / 2021

FEC Identification Number: C

Transaction ID : BC222D71DF

Amount of Each Disbursement this Period: 75.00

Memo Item

C. CORTESE, STEVEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4701 SYCAMORE DRIVE

City YPSILANTI State MI Zip Code 48197

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 29 / 2021

FEC Identification Number: C

Transaction ID : B106CE1B78

Amount of Each Disbursement this Period: 20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

145.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CORTESE, STEVEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4701 SYCAMORE DRIVE

City YPSILANTI State MI Zip Code 48197

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 29 / 2021

FEC Identification Number: C

Transaction ID : B11EE54AFF

Amount of Each Disbursement this Period: 20.00

Memo Item

B. COTE, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3275 GWENLEE CIR

City GLENWOOD State MD Zip Code 21738

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B8790A21FC

Amount of Each Disbursement this Period: 50.00

Memo Item

C. COTE, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3275 GWENLEE CIR

City GLENWOOD State MD Zip Code 21738

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B17D5E8192

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COVELESKIE, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 503 E SAGEBRUSH ST

City LITCHFIELD PARK State AZ Zip Code 85340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2021

FEC Identification Number: C

Transaction ID : B40E12B9D9

Amount of Each Disbursement this Period: 50.00

Memo Item

B. COVELESKIE, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 503 E SAGEBRUSH ST

City LITCHFIELD PARK State AZ Zip Code 85340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2021

FEC Identification Number: C

Transaction ID : B686EAD874:

Amount of Each Disbursement this Period: 50.00

Memo Item

C. COVELESKIE, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 503 E SAGEBRUSH ST

City LITCHFIELD PARK State AZ Zip Code 85340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2021

FEC Identification Number: C

Transaction ID : BE5A6E9824

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. COVINO, FRANK, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 4204 SPALDING DRIVE

City PERKASIE State PA Zip Code 18944

Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 10 / 2021

FEC Identification Number: C
Transaction ID : B21194128B
Amount of Each Disbursement this Period: 50.00

Memo Item

B. COVINO, FRANK, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 4204 SPALDING DRIVE

City PERKASIE State PA Zip Code 18944

Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : B7E574E823L
Amount of Each Disbursement this Period: 50.00

Memo Item

C. COVINO, FRANK, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 4204 SPALDING DRIVE

City PERKASIE State PA Zip Code 18944

Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : BAB0BE696
Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. COVINO, FRANK, , ,			Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 4204 SPALDING DRIVE				
City PERKASIE	State PA	Zip Code 18944	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND			Transaction ID : B4C33C8E71	
Candidate Name			Amount of Each Disbursement this Period 50.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. COWAN, JOHN, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 804 KENT PL				
City CHESAPEAKE	State VA	Zip Code 23320	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND			Transaction ID : BB437966217	
Candidate Name			Amount of Each Disbursement this Period 100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. COWAN, JOHN, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 804 KENT PL				
City CHESAPEAKE	State VA	Zip Code 23320	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND			Transaction ID : B3A3CA4CD	
Candidate Name			Amount of Each Disbursement this Period 100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. COX, JANICE, A., ,		Date of Disbursement MM / DD / YYYY 03 / 28 / 2021
Mailing Address 3813 SW 170TH ST		FEC Identification Number C [REDACTED] Transaction ID : BF3BFC5F2E Amount of Each Disbursement this Period 10.00
City ARCHER	State FL	
Purpose of Disbursement CONTRIBUTION REFUND	Zip Code 32618	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. COX, RICHARD, L, ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address PO BOX 2015		FEC Identification Number C [REDACTED] Transaction ID : B3097233E73 Amount of Each Disbursement this Period 100.00
City BILLINGS	State MT	
Purpose of Disbursement CONTRIBUTION REFUND	Zip Code 59103	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CRAWFORD, JOHN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 710 WILKSHIRE COURT		FEC Identification Number C [REDACTED] Transaction ID : BC9CF17B2: Amount of Each Disbursement this Period 50.00
City GRAND BLANC	State MI	
Purpose of Disbursement CONTRIBUTION REFUND	Zip Code 48439	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. CROXTON, IRENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 S RIVERWALK DR

City PALM COAST State FL Zip Code 32137

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BD63BC9532**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. CULLIMORE, JULIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12 BRIARWOOD CT.

City WALNUT CREEK State CA Zip Code 94597

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BC9834941F1**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. CURRAN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3436C W 111TH LOOP

City WESTMINSTER State CO Zip Code 80031

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : **B59610A9A9**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CURRAN, JOHN, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 3436C W 111TH LOOP		FEC Identification Number C [REDACTED] Transaction ID : BB9E4D3CFC Amount of Each Disbursement this Period 50.00
City WESTMINSTER	State CO	Zip Code 80031
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CURTIS, LAURIE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1154 FREEBOARD BLVD.		FEC Identification Number C [REDACTED] Transaction ID : B45075D6311 Amount of Each Disbursement this Period 100.00
City SAEGERTOWN	State PA	Zip Code 16433
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CURTIS, LAURIE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1154 FREEBOARD BLVD.		FEC Identification Number C [REDACTED] Transaction ID : BE1A75DCE! Amount of Each Disbursement this Period 100.00
City SAEGERTOWN	State PA	Zip Code 16433
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. CURTIS, LAURIE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1154 FREEBOARD BLVD.		FEC Identification Number C [REDACTED] Transaction ID : B861C4B6DC Amount of Each Disbursement this Period [REDACTED] 100.00
City SAEGERTOWN	State PA	Zip Code 16433
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CURTIS, LAURIE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1154 FREEBOARD BLVD.		FEC Identification Number C [REDACTED] Transaction ID : B7455FD1463 Amount of Each Disbursement this Period [REDACTED] 100.00
City SAEGERTOWN	State PA	Zip Code 16433
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DALE, BRUCE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 2865 HAGADORN ROAD		FEC Identification Number C [REDACTED] Transaction ID : BA15E8B2C1 Amount of Each Disbursement this Period [REDACTED] 50.00
City MASON	State MI	Zip Code 48854
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 250.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAMBRISI, SERENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1921 OWRTH AMBOY AVE

City WHITING State NJ Zip Code 08759

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B6D1B68829

Amount of Each Disbursement this Period: 10.00

Memo Item

B. DANGELO, PHILIP, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 67

City GLEN MILLS State PA Zip Code 19342

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B348C323F85

Amount of Each Disbursement this Period: 35.00

Memo Item

C. DANIELS, DENNIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4004 BILL OWENS PARKWAY B

City LONGVIEW State TX Zip Code 75605

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B71FD5A70E

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DANIELS, JAN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 1375 OPAL VALLEY ST		FEC Identification Number C [REDACTED] Transaction ID : B0FAC13D3A Amount of Each Disbursement this Period 10.00
City HENDERSON	State NV	Zip Code 89052
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DANIEL, WENDALL, , ,		Date of Disbursement MM / DD / YYYY 02 / 18 / 2021
Mailing Address 3740 E COUNTY ROAD 700 S		FEC Identification Number C [REDACTED] Transaction ID : BEDEF4280FI Amount of Each Disbursement this Period 25.00
City CLAYTON	State IN	Zip Code 46118
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DARBY, JUDITH, C, ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 970 BEARCREEK DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BA34C9614F Amount of Each Disbursement this Period 35.00
City BARTOW	State FL	Zip Code 33830
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DARBY, JUDITH, C, ,

Full Name (Last, First, Middle Initial)

Mailing Address 970 BEARCREEK DRIVE

City BARTOW State FL Zip Code 33830

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B733166D0C

Amount of Each Disbursement this Period: 35.00

Memo Item

B. DARBY, JUDITH, C, ,

Full Name (Last, First, Middle Initial)

Mailing Address 970 BEARCREEK DRIVE

City BARTOW State FL Zip Code 33830

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BD2D19D413

Amount of Each Disbursement this Period: 35.00

Memo Item

C. DARBY, JUDITH, C, ,

Full Name (Last, First, Middle Initial)

Mailing Address 970 BEARCREEK DRIVE

City BARTOW State FL Zip Code 33830

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2CF8D83A

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DARZANO, MARGO, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 950 MANOR ROAD		FEC Identification Number C [REDACTED]	
City STATEN ISLAND	State NY	Zip Code 10314	Transaction ID : B208FB8231
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. DARZANO, MARGO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 950 MANOR ROAD		FEC Identification Number C [REDACTED]	
City STATEN ISLAND	State NY	Zip Code 10314	Transaction ID : BBD55250FE
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. DARZANO, MARGO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 950 MANOR ROAD		FEC Identification Number C [REDACTED]	
City STATEN ISLAND	State NY	Zip Code 10314	Transaction ID : B2A40CFAE
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DAVIDSON, ELIZABETH, M., ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 100 SADDLEBACK ROAD		FEC Identification Number C [REDACTED] Transaction ID : B0967350264 Amount of Each Disbursement this Period 50.00
City ROLLING HILLS	State CA	Zip Code 90274
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DAVIS, CHARLENE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 787110 KALUNA STREET PH1		FEC Identification Number C [REDACTED] Transaction ID : B81DB835B4 Amount of Each Disbursement this Period 35.00
City KAILUA KONA	State HI	Zip Code 96740
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DAVIS, CHARLENE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 787110 KALUNA STREET PH1		FEC Identification Number C [REDACTED] Transaction ID : B4DD26FAF Amount of Each Disbursement this Period 25.00
City KAILUA KONA	State HI	Zip Code 96740
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DAVIS, CHARLENE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 787110 KALUNA STREET PH1		FEC Identification Number C [REDACTED] Transaction ID : BE91F385AD Amount of Each Disbursement this Period [REDACTED] 35.00	
City KAILUA KONA	State HI	Zip Code 96740	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. DAVIS, CHARLENE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 787110 KALUNA STREET PH1		FEC Identification Number C [REDACTED] Transaction ID : BDD1BA58E4 Amount of Each Disbursement this Period [REDACTED] 25.00	
City KAILUA KONA	State HI	Zip Code 96740	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. DAVIS, CHARLENE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 787110 KALUNA STREET PH1		FEC Identification Number C [REDACTED] Transaction ID : BE74C6C604 Amount of Each Disbursement this Period [REDACTED] 50.00	
City KAILUA KONA	State HI	Zip Code 96740	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 110.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BDFA3086C9**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B6A1FFA727I**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BAC353E14F**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B71D16AC67

Amount of Each Disbursement this Period: 25.00

Memo Item

B. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B924185056B

Amount of Each Disbursement this Period: 50.00

Memo Item

C. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B0150454FF

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

110.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B671E5C91C

Amount of Each Disbursement this Period: 25.00

Memo Item

B. DAVIS, CHARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 787110 KALUNA STREET
PH1

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE3FDD5621

Amount of Each Disbursement this Period: 25.00

Memo Item

C. DAVIS, MARGUERITE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1602 HIGH ST

City ROME State GA Zip Code 30161

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : BE0049697A

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DAWES, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 290 APPLEWOOD LANE

City HILTON State NY Zip Code 14468

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA016EB68C

Amount of Each Disbursement this Period: 35.00

Memo Item

B. DE VRIES, HANLIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3317 WESTMINSTER RD

City JANESVILLE State WI Zip Code 53546

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : BC1E8695FE!

Amount of Each Disbursement this Period: 35.00

Memo Item

C. DE VRIES, HANLIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3317 WESTMINSTER RD

City JANESVILLE State WI Zip Code 53546

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B82F0A5375

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEBLASE, GREGORY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 104 CART ROAD

City WILLIAMSBURGH State VA Zip Code 23188

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C

Transaction ID : B761D2DDFC

Amount of Each Disbursement this Period: 200.00

Memo Item

B. DECKER, MOLLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 38329 OLD MILL WAY

City OCEAN VIEW State DE Zip Code 19970

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BFAEF27E24

Amount of Each Disbursement this Period: 25.00

Memo Item

C. DEESE, DIANE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1420 DOUGMAR DRIVE

City SANTA CRUZ State CA Zip Code 95062

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B8D656425B

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DELGADO, COLIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 164 CHESTNUT STREET

City YOUNGSTOWN State NY Zip Code 14174

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 15 / 2021

FEC Identification Number: C

Transaction ID : B3D9BAF803

Amount of Each Disbursement this Period: 1.00

Memo Item

B. DEMASI, JOAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 29 S PIER RD B104

City WARWICK State RI Zip Code 02888

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1038147D8C

Amount of Each Disbursement this Period: 5.00

Memo Item

C. DEMASI, JOAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 29 S PIER RD B104

City WARWICK State RI Zip Code 02888

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BCC20D8B1;

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DEMASI, JOAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 29 S PIER RD
B104

City WARWICK State RI Zip Code 02888

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B9757AE5C0

Amount of Each Disbursement this Period: 5.00

Memo Item

B. DEMERITT, STEVEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 830 HUFFAKER ESTATES CIRCLE

City RENO State NV Zip Code 89511

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B2C6FB7392!

Amount of Each Disbursement this Period: 25.00

Memo Item

C. DEMERITT, STEVEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 830 HUFFAKER ESTATES CIRCLE

City RENO State NV Zip Code 89511

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB85733EA7

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DENNEN, JAMES, , ,		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021	
Mailing Address 103 VALENCIA DR.		FEC Identification Number C [REDACTED] Transaction ID : B42233F3901 Amount of Each Disbursement this Period 15.00	
City ISLAMORADA	State FL	Zip Code 33036	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. DESHONG, J. DAVID, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 9196 S. 300 W.		FEC Identification Number C [REDACTED] Transaction ID : BF9F7E24D7f Amount of Each Disbursement this Period 100.00	
City PENDLETON	State IN	Zip Code 46064	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. DEVRIES, BURT, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2878 BAYWOODS		FEC Identification Number C [REDACTED] Transaction ID : BD59BD2804 Amount of Each Disbursement this Period 35.00	
City SHARPSVILLE	State PA	Zip Code 16150	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DICKSON, BILLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2125 WESTWIND DRIVE

City KINGSPORT State TN Zip Code 37660

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B284A12180f

Amount of Each Disbursement this Period: 50.00

Memo Item

B. DIETERMAN, AL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7092 CRYSTALVIEW SE

City CALEDONIA State MI Zip Code 49316

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BD720A6C20f

Amount of Each Disbursement this Period: 250.00

Memo Item

C. DIETERMAN, AL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7092 CRYSTALVIEW SE

City CALEDONIA State MI Zip Code 49316

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BF62E9F19B

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 550.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DIETERMAN, AL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7092 CRYSTALVIEW SE		FEC Identification Number C [REDACTED] Transaction ID : B75821B5D9I Amount of Each Disbursement this Period [REDACTED] 250.00	
City CALEDONIA	State MI	Zip Code 49316	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. DIETERMAN, AL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7092 CRYSTALVIEW SE		FEC Identification Number C [REDACTED] Transaction ID : BFCAE4A9E2 Amount of Each Disbursement this Period [REDACTED] 250.00	
City CALEDONIA	State MI	Zip Code 49316	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. DIETERMAN, AL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7092 CRYSTALVIEW SE		FEC Identification Number C [REDACTED] Transaction ID : B82B252FE2 Amount of Each Disbursement this Period [REDACTED] 250.00	
City CALEDONIA	State MI	Zip Code 49316	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 750.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DIETERMAN, AL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7092 CRYSTALVIEW SE

City CALEDONIA State MI Zip Code 49316

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BAD423E8B3

Amount of Each Disbursement this Period: 250.00

Memo Item

B. DIETZE, CARL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3 CANDLELIGHT ROAD

City RAMSEY State NJ Zip Code 07446

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BEECC8D2E9

Amount of Each Disbursement this Period: 25.00

Memo Item

C. DILLE, CLINTON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 248 WOODRIDGE DR

City TWIN FALLS State ID Zip Code 83301

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B8AF6D8F49

Amount of Each Disbursement this Period: 75.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DITOSTO, SAMANTHA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 580 S. SAPODILLA AVE
207

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C
Transaction ID : BD5BE2D370
Amount of Each Disbursement this Period: 35.00

Memo Item

B. DIWA, JESSE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10467 MANILA AVE.

City SAN DIEGO State CA Zip Code 92126

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C
Transaction ID : B5AB0D0816
Amount of Each Disbursement this Period: 25.00

Memo Item

C. DIX, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 628 PARK AVE.
B

City SOUTH PASADENA State CA Zip Code 91030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C
Transaction ID : BBCC2D2F1
Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOLLIOLE, CAROL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4229 S. PRIEUR ST

City NEW ORLEANS State LA Zip Code 70125

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BFBA38A815**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. DOLLIOLE, CAROL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4229 S. PRIEUR ST

City NEW ORLEANS State LA Zip Code 70125

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B7AE3A089D**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. DOLLIOLE, CAROL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4229 S. PRIEUR ST

City NEW ORLEANS State LA Zip Code 70125

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B0A5227A24**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DOLLIOLE, CAROL, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4229 S. PRIEUR ST		FEC Identification Number C [REDACTED] Transaction ID : BB0F3AD4B4 Amount of Each Disbursement this Period [REDACTED] 35.00	
City NEW ORLEANS	State LA	Zip Code 70125	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. DOLLIOLE, CAROL, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4229 S. PRIEUR ST		FEC Identification Number C [REDACTED] Transaction ID : BB2CFFB86C Amount of Each Disbursement this Period [REDACTED] 25.00	
City NEW ORLEANS	State LA	Zip Code 70125	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. DOMINGUZ, JOSE, , ,		Date of Disbursement MM / DD / YYYY 05 / 22 / 2021	
Mailing Address 4876 RUTH AVE		FEC Identification Number C [REDACTED] Transaction ID : B48F35AADc Amount of Each Disbursement this Period [REDACTED] 150.00	
City LOA ANGLES	State CA	Zip Code 90041	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 210.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOMINGUZ, JOSE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4876 RUTH AVE

City LOA ANGLER State CA Zip Code 90041

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 10 / 2021

FEC Identification Number: C

Transaction ID : BAF18728D6

Amount of Each Disbursement this Period: 50.00

Memo Item

B. DONAHUE, ELLEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3003 AVE S

City BROOKLYN State NY Zip Code 11229

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BBC3B28F71

Amount of Each Disbursement this Period: 35.00

Memo Item

C. DONES, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1110 GILKEY RUN RD

City BARDSTOWN State KY Zip Code 40004

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2021

FEC Identification Number: C

Transaction ID : B4918BA859

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DOPHEIDE, DIANE, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 120 SLOCUMB LANE		FEC Identification Number C [REDACTED]	
City MOORESVILLE	State NC	Zip Code 28117	Transaction ID : B7AD9A9CD
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. DOUGHARTY, RALPH, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1602 VALENTINE STREET		FEC Identification Number C [REDACTED]	
City HOUSTON	State TX	Zip Code 77019	Transaction ID : B85BF5DD64
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. DOUGHERTY, MIKE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 6507 PACIFIC AVE. PMB 235		FEC Identification Number C [REDACTED]	
City STOCKTON	State CA	Zip Code 95207	Transaction ID : B1530265EC
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOVER, FREDRIC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5414 EAST CHARLESTON AVENUE

City SCOTTSDALE State AZ Zip Code 85254

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B3C5F9AED6

Amount of Each Disbursement this Period: 50.00

Memo Item

B. DOVER, JEFF, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 941 RASHFORD DR.

City PLACENTIA State CA Zip Code 92870

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B2D266208F7

Amount of Each Disbursement this Period: 50.00

Memo Item

C. DOWNING, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3369 ROBERT LEE ROAD

City TRUSSVILLE State AL Zip Code 35173

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2021

FEC Identification Number: C

Transaction ID : BA7B3963C1

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DOYLE, DIANE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 110 HOLLY STREET

City LAKE JACKSON State TX Zip Code 77566

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE189798C1

Amount of Each Disbursement this Period: 50.00

Memo Item

B. DOYLE, JACK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 761 WOODLAND CT.

City BARTLETT State IL Zip Code 60103

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BCF4A55BC2

Amount of Each Disbursement this Period: 50.00

Memo Item

C. DOYLE, JACK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 761 WOODLAND CT.

City BARTLETT State IL Zip Code 60103

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B7FEE04B93

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. DRAGER, ANNA, M, ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 800 NORTHSIDE COURT 811		FEC Identification Number C [REDACTED] Transaction ID : B69223CBA7
City LITITZ	State PA	Zip Code 17543
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. DRAGER, ANNA, M, ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 800 NORTHSIDE COURT 811		FEC Identification Number C [REDACTED] Transaction ID : BBB4B9A9Ae
City LITITZ	State PA	Zip Code 17543
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. DROBILISCH, SANDOR, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 3410 BLUE GRASS CT		FEC Identification Number C [REDACTED] Transaction ID : BFE6197343.
City MORGAN HILL	State CA	Zip Code 95037
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUGAN, AUDREY, T, ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 33

City BONSALL State CA Zip Code 92003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BC2C14C0B9

Amount of Each Disbursement this Period: 35.00

Memo Item

B. DUGAN, AUDREY, T, ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 33

City BONSALL State CA Zip Code 92003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BDF6FBC8FC

Amount of Each Disbursement this Period: 35.00

Memo Item

C. DUGAN, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14726 LAKE MEADOWS DRIVE

City PERRYSBURG State OH Zip Code 43551

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B84D95E2BF

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUNCAN, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15815 CEDARMILL DRIVE

City CHESTERFIELD State MO Zip Code 63017

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C

Transaction ID : B2FD031079I

Amount of Each Disbursement this Period: 35.00

Memo Item

B. DUNCAN, KARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 SANTA ANA CT

City ODESSA State TX Zip Code 79765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B0F788BB33I

Amount of Each Disbursement this Period: 100.00

Memo Item

C. DUNCAN, KARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 SANTA ANA CT

City ODESSA State TX Zip Code 79765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BF7DFC5ECI

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 235.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DUNN, RUSSELL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7106 NE PAR LANE

City VANCOUVER State WA Zip Code 98662

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BBC19A1FC4

Amount of Each Disbursement this Period: 25.00

Memo Item

B. DURLIAT, JACK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1420 VIA PORTOFINO

City NAPLES State FL Zip Code 34108

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : B623D1845D5

Amount of Each Disbursement this Period: 500.00

Memo Item

C. DUVAL, ROSE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13275 CRAIL CT

City BRISTOW State VA Zip Code 20136

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BDA549AA61

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 625.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. DWONCH, LAURIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 55691 SUMMERLIN RD

City MYRTLE POINT State OR Zip Code 97458

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BE3DB588F2

Amount of Each Disbursement this Period: 10.00

Memo Item

B. DYER, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 310 LANDBURG LN

City COLLEGE STATION State TX Zip Code 77845

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C

Transaction ID : B57B680ED5I

Amount of Each Disbursement this Period: 10.00

Memo Item

C. EARP, JONATHAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5303 EAST 3RD STREET

City TULSA State OK Zip Code 74112

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B567B3A02C

Amount of Each Disbursement this Period: 1.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 21.50

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ECKERT, BARRY, , ,		Date of Disbursement MM / DD / YYYY 03 / 08 / 2021
Mailing Address 1811 W LAKEVIEW DR APT E09		FEC Identification Number C [REDACTED] Transaction ID : B6A304DDCC Amount of Each Disbursement this Period 75.00
City JOHNSON CITY	State TN	Zip Code 37601
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EDWARDS, ALAN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 21025 FM 56		FEC Identification Number C [REDACTED] Transaction ID : B417036B0EE Amount of Each Disbursement this Period 100.00
City KOPPERL	State TX	Zip Code 76652
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. EHARA, FE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 529 SOUTH SAGE ST.		FEC Identification Number C [REDACTED] Transaction ID : BAC247671A Amount of Each Disbursement this Period 35.00
City LOMPOC	State CA	Zip Code 93436
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

210.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EHRlich, EDWARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15415 T ST

City OMAHA State NE Zip Code 68137

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B15179E8FC1

Amount of Each Disbursement this Period: 5.00

Memo Item

B. EHRlich, EDWARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15415 T ST

City OMAHA State NE Zip Code 68137

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B62F8BF6F7:

Amount of Each Disbursement this Period: 5.00

Memo Item

C. EHRsam, DONNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5219 PLUTO DR

City LOUISVILLE State KY Zip Code 40258

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B1A3DD3917

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. EISENACHER, DAVID, , ,		Date of Disbursement MM / DD / YYYY 03 / 19 / 2021
Mailing Address 108 CRISTAL SPRINGS COURT		FEC Identification Number C [REDACTED] Transaction ID : B9CD457E6E Amount of Each Disbursement this Period 35.00
City BREA	State CA	Zip Code 92821
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. EJCHORSZT, MARGARET, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 3 HAZELWOOD DR		FEC Identification Number C [REDACTED] Transaction ID : B4211126F16 Amount of Each Disbursement this Period 35.00
City BAL TIC	State CT	Zip Code 06330
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ELLWOOD, LYNN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 156 MOORINGS PARK DR. 206		FEC Identification Number C [REDACTED] Transaction ID : B0703C5CF4 Amount of Each Disbursement this Period 50.00
City NAPLES	State FL	Zip Code 34105
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

120.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ELLWOOD, LYNN, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021		
Mailing Address 156 MOORINGS PARK DR. 206			FEC Identification Number C Transaction ID : B9CCBEFF11 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item		
City NAPLES	State FL	Zip Code 34105			
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ELLWOOD, LYNN, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021		
Mailing Address 156 MOORINGS PARK DR. 206			FEC Identification Number C Transaction ID : B91814B9783 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item		
City NAPLES	State FL	Zip Code 34105			
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ELLWOOD, LYNN, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021		
Mailing Address 156 MOORINGS PARK DR. 206			FEC Identification Number C Transaction ID : BB3E2A0F8C Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item		
City NAPLES	State FL	Zip Code 34105			
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional)..... ▶

150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ELO, THEODORE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1602 PACIFIC ST

City SAINT JOSEPH State MO Zip Code 64503

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : B3219F98A4

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ELO, THEODORE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1602 PACIFIC ST

City SAINT JOSEPH State MO Zip Code 64503

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : B867251E824

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ELTRINGHAM, LYDIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10227 , MCCLEMONT AVE

City TUJUNGA State CA Zip Code 91042

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 26 / 2021

FEC Identification Number: C

Transaction ID : B66CE2AFF2

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ELTRINGHAM, LYDIA, , ,		Date of Disbursement MM / DD / YYYY 03 / 26 / 2021	
Mailing Address 10227 , MCCLEMONT AVE		FEC Identification Number C [REDACTED] Transaction ID : BFA2D2890F	
City TUJUNGA	State CA	Zip Code 91042	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ERLER, CHERIE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 7860 BAR X RD		FEC Identification Number C [REDACTED] Transaction ID : B46168B98E9	
City COLORADO SPRINGS	State CO	Zip Code 80908	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ERLER, CHERIE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 7860 BAR X RD		FEC Identification Number C [REDACTED] Transaction ID : BB7F42EB7/	
City COLORADO SPRINGS	State CO	Zip Code 80908	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ERLER, CHERIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7860 BAR X RD

City COLORADO SPRINGS State CO Zip Code 80908

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BB81635EA6**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. ESKUT, ROGER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6200 GLEN VALLEY TERRACE, UNIT B

City FREDERICK State MD Zip Code 21701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B9BC7C199E**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ESPOSITO, FRANK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2131 NE 42ND COURT UNIT 106E
UNIT 106E

City POMPANO BEACH State FL Zip Code 33064

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B909E2926F!**

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 80.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ESSLEY, BETTE, A, ,

Full Name (Last, First, Middle Initial)

Mailing Address 2925 TREMONT STREET, APT. A2

City COLORADO SPRINGS State CO Zip Code 80907

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B0AB230994

Amount of Each Disbursement this Period: 7.00

Memo Item

B. EVANS, SUE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4590 HIGHLAND M

City CABOOL State MO Zip Code 65689

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BE2693261A9

Amount of Each Disbursement this Period: 300.00

Memo Item

C. EVANS, SUSAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 CHRYSLER DR

City COLBY State KS Zip Code 67701

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BDDBDA572

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 342.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. EVANS, SUSAN, , ,			Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 14 CHRYSLER DR			FEC Identification Number C [REDACTED]	
City COLBY	State KS	Zip Code 67701	Transaction ID : B87629CE42 Amount of Each Disbursement this Period [REDACTED] 35.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		State: District:		
Full Name (Last, First, Middle Initial) B. EVANS, SUSAN, , ,			Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 14 CHRYSLER DR			FEC Identification Number C [REDACTED]	
City COLBY	State KS	Zip Code 67701	Transaction ID : B57D6798204 Amount of Each Disbursement this Period [REDACTED] 35.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		State: District:		
Full Name (Last, First, Middle Initial) C. EVANS, THOMAS, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 700 COLONY DR.			FEC Identification Number C [REDACTED]	
City CHESAPEAKE	State VA	Zip Code 23322	Transaction ID : B53C233A37 Amount of Each Disbursement this Period [REDACTED] 25.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		State: District:		
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 95.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BEBE6D1E2I

Amount of Each Disbursement this Period: 25.00

Memo Item

B. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B6D18E08DD

Amount of Each Disbursement this Period: 25.00

Memo Item

C. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B1740D0037I

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BBCFA87482**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BD3CF13388I**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B5350F9C81!**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B6A5629D9D

Amount of Each Disbursement this Period: 35.00

Memo Item

B. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B600FB0216C

Amount of Each Disbursement this Period: 35.00

Memo Item

C. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BF080DBC91

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BE1F62EB20

Amount of Each Disbursement this Period: 35.00

Memo Item

B. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B4FA61C71E!

Amount of Each Disbursement this Period: 35.00

Memo Item

C. EVANS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 700 COLONY DR.

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B8A250CB81

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. EVERETT, CONNIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2237 HWY. 112		FEC Identification Number C [REDACTED] Transaction ID : BB1838D151I Amount of Each Disbursement this Period [REDACTED] 25.00	
City DERIDDER	State LA	Zip Code 70634	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. EVERETT, CONNIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2237 HWY. 112		FEC Identification Number C [REDACTED] Transaction ID : BA283ED0E5I Amount of Each Disbursement this Period [REDACTED] 25.00	
City DERIDDER	State LA	Zip Code 70634	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. EVERETT, CONNIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2237 HWY. 112		FEC Identification Number C [REDACTED] Transaction ID : BD505AB8A; Amount of Each Disbursement this Period [REDACTED] 25.00	
City DERIDDER	State LA	Zip Code 70634	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 75.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. EVERETT, CONNIE, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 2237 HWY. 112

City DERIDDER State LA Zip Code 70634

Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : B0C585363A
Amount of Each Disbursement this Period: 25.00

Memo Item

B. EVERETT, CONNIE, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 2237 HWY. 112

City DERIDDER State LA Zip Code 70634

Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : BA907926107
Amount of Each Disbursement this Period: 25.00

Memo Item

C. EVERETT, CONNIE, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 2237 HWY. 112

City DERIDDER State LA Zip Code 70634

Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : B8E332935D
Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. EVERETT, CONNIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2237 HWY. 112		FEC Identification Number C [REDACTED] Transaction ID : BEE71B0FF4 Amount of Each Disbursement this Period [REDACTED] 25.00	
City DERIDDER	State LA	Zip Code 70634	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. EVERETT, CONNIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2237 HWY. 112		FEC Identification Number C [REDACTED] Transaction ID : BE609D75293 Amount of Each Disbursement this Period [REDACTED] 25.00	
City DERIDDER	State LA	Zip Code 70634	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. EVERETT, CONNIE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2237 HWY. 112		FEC Identification Number C [REDACTED] Transaction ID : B2E56185F8 Amount of Each Disbursement this Period [REDACTED] 25.00	
City DERIDDER	State LA	Zip Code 70634	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 75.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FADEL, EDWARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7065 SURFBIRD CIRCLE

City CARLSBAD State CA Zip Code 92011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BCCEF5940D

Amount of Each Disbursement this Period: 50.00

Memo Item

B. FADEL, EDWARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7065 SURFBIRD CIRCLE

City CARLSBAD State CA Zip Code 92011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BD29037F9AI

Amount of Each Disbursement this Period: 50.00

Memo Item

C. FADEL, EDWARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7065 SURFBIRD CIRCLE

City CARLSBAD State CA Zip Code 92011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BEB5690ED8

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FADEL, EDWARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7065 SURFBIRD CIRCLE

City CARLSBAD State CA Zip Code 92011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6026581393

Amount of Each Disbursement this Period: 50.00

Memo Item

B. FADELEY, SANDRA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4602 E LEWIS AV 0

City PHOENIX State AZ Zip Code 85008-2406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B9BF61A62C

Amount of Each Disbursement this Period: 25.00

Memo Item

C. FADELEY, SANDRA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4602 E LEWIS AV 0

City PHOENIX State AZ Zip Code 85008-2406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BECC612A8:

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. FADELEY, SANDRA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 4602 E LEWIS AV 0		FEC Identification Number C [REDACTED] Transaction ID : B5C0AB41B9 Amount of Each Disbursement this Period 25.00	
City PHOENIX	State AZ	Zip Code 85008-2406	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. FALES, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2021	
Mailing Address 24 AVALON DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B234D3F870E Amount of Each Disbursement this Period 50.00	
City EAST FALMOUTH	State MA	Zip Code 02536	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. FARLEY, PATRICIA, R, ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3150 SPRING LAKE DR NE		FEC Identification Number C [REDACTED] Transaction ID : B8281C2947I Amount of Each Disbursement this Period 50.00	
City CONYERS	State GA	Zip Code 30013	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FARRIS, VERONICA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1001 DRY CREEK CT

City SAINT JOHNS State FL Zip Code 32259

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 17 / 2021

FEC Identification Number: C

Transaction ID : **BB78A586B2**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. FERGUSON, ROSEMARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 18478, ILLINOIS HIGHWAY 78

City ANNAWAN State IL Zip Code 61234

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B75CB87467!**

Amount of Each Disbursement this Period: 15.00

Memo Item

C. FESH, ROBERT, , MR,

Full Name (Last, First, Middle Initial)

Mailing Address 40 WILLIAM ST
APT 413

City DANBURY State CT Zip Code 06810

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BCF1F1FD3E**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 80.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. FICHERA, JOHN, , ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2021	
Mailing Address 36 WEISNER PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : B731763D014 Amount of Each Disbursement this Period [REDACTED] 35.00	
City METHUEN	State MA	Zip Code 01844	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. FICHERA, JOHN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 36 WEISNER PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : B4430FBD83f Amount of Each Disbursement this Period [REDACTED] 35.00	
City METHUEN	State MA	Zip Code 01844	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. FINKE, SHARON, , ,		Date of Disbursement MM / DD / YYYY 03 / 23 / 2021	
Mailing Address 118 PINWOOD CT		FEC Identification Number C [REDACTED] Transaction ID : B7C725E2CF Amount of Each Disbursement this Period [REDACTED] 25.00	
City TROY	State IL	Zip Code 62294	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 95.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: 010

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : BA54892FF7

Amount of Each Disbursement this Period: 35.00

Memo Item

B. FIOR, DALE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: 010

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : BBC47B84F8

Amount of Each Disbursement this Period: 25.00

Memo Item

C. FIOR, DALE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: 010

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : B379517F6A

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FIOR, DALE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : B151BDE77F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. FIOR, DALE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 659 1ST STREET
502

City HOBOKEN State NJ Zip Code 07030

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : BF60DE9F5E:

Amount of Each Disbursement this Period: 25.00

Memo Item

C. FIRIOS, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1923 EAST CENTRAL BLVD.

City ORLANDO State FL Zip Code 32803

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C

Transaction ID : B15C386EA0

Amount of Each Disbursement this Period: 30.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRIOS, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1923 EAST CENTRAL BLVD.

City ORLANDO State FL Zip Code 32803

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B13A064D83I

Amount of Each Disbursement this Period: 30.00

Memo Item

B. FISHER, TERESA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 500 KANSAS ST.

City EL SEGUNDO State CA Zip Code 90245

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B5ECBCE0C

Amount of Each Disbursement this Period: 25.00

Memo Item

C. FITZPATRICK, DOUG, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1846 ROBIN DR

City SAN JOSE State CA Zip Code 95124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BE6ABC819I

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLAHERTY, AUTUMN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6036 COUNTY ROAD 1480

City ADA State OK Zip Code 74820

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2021

FEC Identification Number: C

Transaction ID : **BF0C768896f**

Amount of Each Disbursement this Period: 40.00

Memo Item

B. FLAHERTY, NANCY, J, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1270 N ROBWOOD CIRCLE

City ANAHEIM State CA Zip Code 92807

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2021

FEC Identification Number: C

Transaction ID : **BD509858BAf**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. FLAREY, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5665 BISHOP CT

City NASHPORT State OH Zip Code 43830

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B626594ADE**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLAREY, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5665 BISHOP CT

City NASHPORT State OH Zip Code 43830

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B3BE927DC#

Amount of Each Disbursement this Period: 35.00

Memo Item

B. FLAREY, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5665 BISHOP CT

City NASHPORT State OH Zip Code 43830

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B5578BCD91'

Amount of Each Disbursement this Period: 35.00

Memo Item

C. FLAREY, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5665 BISHOP CT

City NASHPORT State OH Zip Code 43830

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B10F28F92A

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. FLAREY, ANTHONY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5665 BISHOP CT		FEC Identification Number C [REDACTED] Transaction ID : B3D441E4BF Amount of Each Disbursement this Period 35.00	
City NASHPORT	State OH	Zip Code 43830	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. FLEMING, BERNARD, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 10730 W YUKON DR		FEC Identification Number C [REDACTED] Transaction ID : BF48CDE80E Amount of Each Disbursement this Period 50.00	
City SUN CITY	State AZ	Zip Code 85373	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. FLETCHER, SHARON, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address HC 70 BOX 612		FEC Identification Number C [REDACTED] Transaction ID : B8BAD9ED7 Amount of Each Disbursement this Period 25.00	
City JASPER	State AR	Zip Code 72641	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FLOYD, FRANK, , MR,

Full Name (Last, First, Middle Initial)

Mailing Address 5400 ST CHARLES RD

City COLUMBIA State MO Zip Code 65201

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE4CED7D15

Amount of Each Disbursement this Period: 25.00

Memo Item

B. FOLLAS, TERRANCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2213 NW 12TH STREET

City BLUE SPRINGS State MO Zip Code 64015

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB2FE69A97:

Amount of Each Disbursement this Period: 100.00

Memo Item

C. FOLLAS, TERRANCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2213 NW 12TH STREET

City BLUE SPRINGS State MO Zip Code 64015

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BB714B5552

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FONTICIELLA, ADALBERTO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PARAGOULD

City PARAGOULD State AR Zip Code 72450

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B9309F467C

Amount of Each Disbursement this Period: 50.00

Memo Item

B. FONTICIELLA, ADALBERTO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PARAGOULD

City PARAGOULD State AR Zip Code 72450

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : BF6827BDD9

Amount of Each Disbursement this Period: 50.00

Memo Item

C. FONTICIELLA, ADALBERTO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PARAGOULD

City PARAGOULD State AR Zip Code 72450

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B44F9A0DB7

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. FORD, JAMES, , ,			Date of Disbursement MM / DD / YYYY 03 / 25 / 2021		
Mailing Address 724 OWL LANE			FEC Identification Number C [REDACTED] Transaction ID : BEA74249B8 Amount of Each Disbursement this Period 35.00		
City STEVENS POINT	State WI	Zip Code 54482	Category/Type 010		
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. FORD, JAMES, , ,			Date of Disbursement MM / DD / YYYY 03 / 25 / 2021		
Mailing Address 724 OWL LANE			FEC Identification Number C [REDACTED] Transaction ID : BC81BEE303 Amount of Each Disbursement this Period 35.00		
City STEVENS POINT	State WI	Zip Code 54482	Category/Type 010		
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. FOSTER, DEAN, , ,			Date of Disbursement MM / DD / YYYY 01 / 05 / 2021		
Mailing Address 82-5961 WAKIDA			FEC Identification Number C [REDACTED] Transaction ID : B8916A0C2A Amount of Each Disbursement this Period 50.00		
City CAPTAIN COOK	State HI	Zip Code 96704	Category/Type 010		
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional)..... ▶	120.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FOUCHE, MARIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3845 S COCHRAN AVE

City LOS ANGELES State CA Zip Code 90008

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BA61DABA2

Amount of Each Disbursement this Period: 100.00

Memo Item

B. FOUCHE, MARIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3845 S COCHRAN AVE

City LOS ANGELES State CA Zip Code 90008

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BCC3E5B4E3

Amount of Each Disbursement this Period: 100.00

Memo Item

C. FOUCHE, MARIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3845 S COCHRAN AVE

City LOS ANGELES State CA Zip Code 90008

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B62019B65D

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FRANKLIN, MYLES, , , JR

Full Name (Last, First, Middle Initial)

Mailing Address 94 BELMONT PARK RD

City BREWSTER State MA Zip Code 02631

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BEFAF0F191

Amount of Each Disbursement this Period: 100.00

Memo Item

B. FRANKLIN, MYLES, , , JR

Full Name (Last, First, Middle Initial)

Mailing Address 94 BELMONT PARK RD

City BREWSTER State MA Zip Code 02631

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B7AF178CEC

Amount of Each Disbursement this Period: 100.00

Memo Item

C. FRANKLIN, MYLES, , , JR

Full Name (Last, First, Middle Initial)

Mailing Address 94 BELMONT PARK RD

City BREWSTER State MA Zip Code 02631

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4C28AD128

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. FRANKLIN, MYLES, , , JR		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 94 BELMONT PARK RD		FEC Identification Number C [REDACTED] Transaction ID : BEAFD47191
City BREWSTER	State MA	Zip Code 02631
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. FREDERICKSON, ANDREA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 3723 W MONTE CRISTO AVE		FEC Identification Number C [REDACTED] Transaction ID : BF999AA1C6
City PHOENIX	State AZ	Zip Code 85053
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. FREEMAN, ELAINE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address P O BOX 941210		FEC Identification Number C [REDACTED] Transaction ID : BF54EE7FE6
City SIMI VALLEY	State CA	Zip Code 93094
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. FREEMAN, ELAINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 941210

City SIMI VALLEY State CA Zip Code 93094

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B79651814AE

Amount of Each Disbursement this Period: 25.00

Memo Item

B. FREEMAN, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 421 WISCONSIN AVE UNIT 3

City OAK PARK State IL Zip Code 60304

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : B73F28076CI

Amount of Each Disbursement this Period: 65.00

Memo Item

C. FULLER, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2909 WALKERTOWN ROAD

City DAYTON State TN Zip Code 37321

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 15 / 2021

FEC Identification Number: C

Transaction ID : BAAE6199DI

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1090.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. FULLERTON, KEVIN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2538 NEELY STORE RD		FEC Identification Number C [REDACTED] Transaction ID : B9E5C7A091	
City ROCK HILL	State SC	Zip Code 29730	Amount of Each Disbursement this Period [REDACTED] 250.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. FUNK, SHERRY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 2479		FEC Identification Number C [REDACTED] Transaction ID : B65F0C73CE	
City GARDNERVILLE	State NV	Zip Code 89410	Amount of Each Disbursement this Period [REDACTED] 100.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. GABRIEL, MARGARET, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 1030 HARDESTY PLACE WEST		FEC Identification Number C [REDACTED] Transaction ID : B10B537327	
City COLUMBUS	State OH	Zip Code 43204	Amount of Each Disbursement this Period [REDACTED] 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 375.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GABRIEL, MARGARET, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 1030 HARDESTY PLACE WEST		FEC Identification Number C [REDACTED] Transaction ID : B5281B01E4 Amount of Each Disbursement this Period 25.00
City COLUMBUS	State OH	Zip Code 43204
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GAGLIANO, TONY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address P.O. BOX 511382		FEC Identification Number C [REDACTED] Transaction ID : B21312EAA5I Amount of Each Disbursement this Period 35.00
City MILWAUKEE	State WI	Zip Code 53203
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GAGLIANO, TONY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address P.O. BOX 511382		FEC Identification Number C [REDACTED] Transaction ID : B57E9DC936 Amount of Each Disbursement this Period 35.00
City MILWAUKEE	State WI	Zip Code 53203
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	95.00
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GALLAGHER, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1224 SO SALTAIR AVE

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BE064E2E24I

Amount of Each Disbursement this Period: 50.00

Memo Item

B. GALLAGHER, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1224 SO SALTAIR AVE

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B9BC03133E

Amount of Each Disbursement this Period: 50.00

Memo Item

C. GANGELHOFF, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 421 SUMTER AVE S

City MINNEAPOLIS State MN Zip Code 55426

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : B328C508C7

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GARCIA, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 411 BAY BRIDGE DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2021

FEC Identification Number: C

Transaction ID : B811232400A

Amount of Each Disbursement this Period: 50.00

Memo Item

B. GARCIA, NORMA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6902 MYRTLE ST

City HOUSTON State TX Zip Code 77087

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BCB2A7A1A2

Amount of Each Disbursement this Period: 35.00

Memo Item

C. GAROFALO, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 3588

City COSTA MESA State CA Zip Code 92628

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BF0052E873I

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GEIGER, LARRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23568 E MINERAL PL

City AURORA State CO Zip Code 80016

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BA685F9CD6

Amount of Each Disbursement this Period: 100.00

Memo Item

B. GELL, SANDRA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 289 N BAYBERRY PKWY

City MIDDLETOWN State DE Zip Code 19709

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : BEDEC10846

Amount of Each Disbursement this Period: 15.00

Memo Item

C. GENDELMAN, DMITRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1400 AVE S 3A

City BROOKLYN State NY Zip Code 11229

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 22 / 2021

FEC Identification Number: C

Transaction ID : B41B7C691E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 165.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GENTIL, CAROL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1672 DURAN DR

City THE VILLAGES State FL Zip Code 32162

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B73BB20486

Amount of Each Disbursement this Period: 35.00

Memo Item

B. GENTIL, CAROL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1672 DURAN DR

City THE VILLAGES State FL Zip Code 32162

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B19A87C898f

Amount of Each Disbursement this Period: 35.00

Memo Item

C. GEORGE, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 20715 AUBURN PINE CT.

City HUMBLE State TX Zip Code 77346

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B1E6C756B2

Amount of Each Disbursement this Period: 17.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 87.50

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GEORGE, LLOYD, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 46 HAMILTON LN		FEC Identification Number C [REDACTED] Transaction ID : BE42962C11 Amount of Each Disbursement this Period 10.00
City PLAINSBORO	State NJ	Zip Code 08536
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GEORGE, SUSAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 15 / 2021
Mailing Address 3308 CLERMONT DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B9C02D042B1 Amount of Each Disbursement this Period 10.00
City MUSCATINE	State IA	Zip Code 52761
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GEORGE, SUSAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 15 / 2021
Mailing Address 3308 CLERMONT DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B96A62A86F Amount of Each Disbursement this Period 10.00
City MUSCATINE	State IA	Zip Code 52761
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GIBSON, KAREN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 829 PINEHURST DR		FEC Identification Number C [REDACTED] Transaction ID : BC426E4F82 Amount of Each Disbursement this Period 50.00	
City EDGEWOOD	State KY	Zip Code 41017	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. GIBSON, VERNA, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 9167 ELIZABETH LANE		FEC Identification Number C [REDACTED] Transaction ID : B0586178D47 Amount of Each Disbursement this Period 10.00	
City MASON	State OH	Zip Code 45040	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. GIDDENS, AL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3130 JOLLEY DR		FEC Identification Number C [REDACTED] Transaction ID : B13F4B7A5E Amount of Each Disbursement this Period 50.00	
City BURBANK	State CA	Zip Code 91504	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GIDDENS, AL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3130 JOLLEY DR

City BURBANK State CA Zip Code 91504

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BFF67B8280'

Amount of Each Disbursement this Period: 50.00

Memo Item

B. GILBRIDE, KEITH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 133 TYSEN STREET

City STATEN ISLAND State NY Zip Code 10301

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B8D4F83FAF!

Amount of Each Disbursement this Period: 35.00

Memo Item

C. GILLARD, SCOTT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 212 ELM ST

City HANOVER State MA Zip Code 02339

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BFCA79872E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GILLESPIE, AIMEE, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 205 NASH CIRCLE		FEC Identification Number C [REDACTED]	
City OXFORD	State MS	Zip Code 38655	Transaction ID : B9BF2733947
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. GILMORE, LEANNE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address POB 2293		FEC Identification Number C [REDACTED]	
City LONGVIEW	State WA	Zip Code 98632	Transaction ID : B1962187D5E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. GILMOUR, CHARLIE, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 20903 SILVER CHASE LN.		FEC Identification Number C [REDACTED]	
City RICHMOND	State TX	Zip Code 77406	Transaction ID : B939DBAAB
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GLADSTONE, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 12 BILLS WAY		FEC Identification Number C [REDACTED] Transaction ID : B40A5426FD. Amount of Each Disbursement this Period 100.00
City BEDFORD	State NH	Zip Code 03110
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GOINS, SHERRI, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 17825 MESA RANGE DR		FEC Identification Number C [REDACTED] Transaction ID : B3B2A836FD. Amount of Each Disbursement this Period 35.00
City CORNELIUS	State NC	Zip Code 28031
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GOLDBERG, ALAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 688 OLIVE AVE		FEC Identification Number C [REDACTED] Transaction ID : B480732640. Amount of Each Disbursement this Period 25.00
City VENICE	State CA	Zip Code 90291
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

160.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOLDBERG, ALAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 688 OLIVE AVE

City VENICE State CA Zip Code 90291

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B9BA1B478E

Amount of Each Disbursement this Period: 25.00

Memo Item

B. GOLDBERG, ALAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 688 OLIVE AVE

City VENICE State CA Zip Code 90291

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA1C85EDEE

Amount of Each Disbursement this Period: 25.00

Memo Item

C. GOLDEN, HAL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5 SNOWSTAR LN

City SANDY State UT Zip Code 84092

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BBD9B77EE

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GOLEMBE, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 20865 SUGARLOAF LANE		FEC Identification Number C [REDACTED] Transaction ID : B30031C284 Amount of Each Disbursement this Period 15.00	
City BOCA RATON	State FL	Zip Code 33428	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. GOODEN, VANCE, , ,		Date of Disbursement MM / DD / YYYY 01 / 25 / 2021	
Mailing Address 17118 E. LA PASADA DR.		FEC Identification Number C [REDACTED] Transaction ID : BEBFC2EF62 Amount of Each Disbursement this Period 25.00	
City FOUNTAIN HILLS	State AZ	Zip Code 85268	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. GOODEN, VANCE, , ,		Date of Disbursement MM / DD / YYYY 01 / 25 / 2021	
Mailing Address 17118 E. LA PASADA DR.		FEC Identification Number C [REDACTED] Transaction ID : B23288014B Amount of Each Disbursement this Period 25.00	
City FOUNTAIN HILLS	State AZ	Zip Code 85268	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOODEN, VANCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17118 E. LA PASADA DR.

City FOUNTAIN HILLS State AZ Zip Code 85268

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : B6CFB05861

Amount of Each Disbursement this Period: 25.00

Memo Item

B. GOODEN, VANCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17118 E. LA PASADA DR.

City FOUNTAIN HILLS State AZ Zip Code 85268

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : B722FFFABE

Amount of Each Disbursement this Period: 25.00

Memo Item

C. GOODEN, VANCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17118 E. LA PASADA DR.

City FOUNTAIN HILLS State AZ Zip Code 85268

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE9C6FA9C

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GOODMAN, CHERYL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4437 SAINT ANDREWS BLVD

City IRVING State TX Zip Code 75038

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B9F40F3B89I

Amount of Each Disbursement this Period: 50.00

Memo Item

B. GOODWIN, CHARLOTTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX426

City ASH FLAT State AR Zip Code 72513

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 23 / 2021

FEC Identification Number: C

Transaction ID : B7471EA117Z

Amount of Each Disbursement this Period: 35.00

Memo Item

C. GORDON, RONALD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 84 BILTMORE ESTATES

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BBC2731E6E

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GORDON, TERESA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 2706 TURNING ROW LANE		FEC Identification Number C [REDACTED] Transaction ID : BEA8D27546
City MISSOURI CITY	State TX	Zip Code 77459
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. GORDON, TERESA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 2706 TURNING ROW LANE		FEC Identification Number C [REDACTED] Transaction ID : B1F329B5421
City MISSOURI CITY	State TX	Zip Code 77459
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. GOULD, WILLIE, , ,		Date of Disbursement MM / DD / YYYY 02 / 01 / 2021
Mailing Address 399 KATIELEE COVE		FEC Identification Number C [REDACTED] Transaction ID : B16E9A56E2
City DALLAS	State GA	Zip Code 30132
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRABER, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7 BALLYBUNION WAY

City BLUFFTON State SC Zip Code 29910

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B529E2B737

Amount of Each Disbursement this Period: 100.00

Memo Item

B. GRAF, JEFFREY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3 TERESA LN

City BELLA VISTA State AR Zip Code 72715

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B34459EED4

Amount of Each Disbursement this Period: 35.00

Memo Item

C. GRAF, JEFFREY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3 TERESA LN

City BELLA VISTA State AR Zip Code 72715

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BDD41560B2

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 170.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRAHAM, ELIZABETH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2300 W MORTON AVE 11

City PORTERVILLE State CA Zip Code 93257

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2021

FEC Identification Number: C

Transaction ID : BEB8A353EF

Amount of Each Disbursement this Period: 30.00

Memo Item

B. GRAHAM, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 957 S HANLON WAY

City ANAHEIM State CA Zip Code 92808

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B1831403875

Amount of Each Disbursement this Period: 33.00

Memo Item

C. GRANADOS, RODOLFO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2181 JAMIESON AVE 2009

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BEAB0A4E8

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 113.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GRANADOS, RODOLFO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 2181 JAMIESON AVE 2009		FEC Identification Number C [REDACTED] Transaction ID : B3948580976 Amount of Each Disbursement this Period 50.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. GREEN, JOAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 4473 BARCLAY FAIR WAY		FEC Identification Number C [REDACTED] Transaction ID : BFBB4D6A7F Amount of Each Disbursement this Period 25.00
City LAKE WORTH	State FL	Zip Code 33449
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GREEN, PATRICIA, ANN STORMY, ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 1950 EAST FOOTHILL DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B5A5F34663 Amount of Each Disbursement this Period 15.00
City SAN BERNARDINO	State CA	Zip Code 92404
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GREZA, GEORGE, , ,		Date of Disbursement MM / DD / YYYY 02 / 10 / 2021	
Mailing Address 5335 WINDTREE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BEFFB244B2 Amount of Each Disbursement this Period 5.00	
City DOYLESTOWN	State PA	Zip Code 18902	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. GREZA, GEORGE, , ,		Date of Disbursement MM / DD / YYYY 02 / 10 / 2021	
Mailing Address 5335 WINDTREE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B8A8FFEBB1 Amount of Each Disbursement this Period 5.00	
City DOYLESTOWN	State PA	Zip Code 18902	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. GRIFFIN, JAMES, , ,		Date of Disbursement MM / DD / YYYY 01 / 19 / 2021	
Mailing Address 100 OCEANGREENS LN		FEC Identification Number C [REDACTED] Transaction ID : B3A62128D5 Amount of Each Disbursement this Period 25.00	
City OAK ISLAND	State NC	Zip Code 28465	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRIFFIN, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 100 OCEANGREENS LN

City OAK ISLAND State NC Zip Code 28465

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B7BB55F502

Amount of Each Disbursement this Period: 25.00

Memo Item

B. GRIFFITH, JACQUELIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5439 PACES MILL RD.

City TALLAHASSEE State FL Zip Code 32309

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BF8788FC114

Amount of Each Disbursement this Period: 35.00

Memo Item

C. GRIFFITH, MARC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3159 HIGHWAY 13

City CUMBERLAND FURNACE State TN Zip Code 37051

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BB32365972

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRIFFITH, MARC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3159 HIGHWAY 13

City CUMBERLAND FURNACE State TN Zip Code 37051

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : BB0E2AE119

Amount of Each Disbursement this Period: 15.00

Memo Item

B. GRIMLEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2440 PROVENCE CR

City WESTON State FL Zip Code 33327

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BADA E026DF

Amount of Each Disbursement this Period: 50.00

Memo Item

C. GRIMLEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2440 PROVENCE CR

City WESTON State FL Zip Code 33327

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B88ABB8293

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 115.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GRIMLEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2440 PROVENCE CR

City WESTON State FL Zip Code 33327

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B578C67A85!

Amount of Each Disbursement this Period: 50.00

Memo Item

B. GRIMLEY, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2440 PROVENCE CR

City WESTON State FL Zip Code 33327

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B0C151C851f

Amount of Each Disbursement this Period: 50.00

Memo Item

C. GRIPPE, JOAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 286 DEYO HILL RD.
1083 EAST

City JOHNSON CITY State NY Zip Code 13790

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BA61069E1D

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. GUAJARDO, DAVID, , ,		Date of Disbursement M M M / D D D / Y Y Y Y Y 05 / 19 / 2021	
Mailing Address P.O. BOX 1991			
City VAN ALSTYNE	State TX	Zip Code 75495	
Purpose of Disbursement CONTRIBUTION REFUND		010	FEC Identification Number C [REDACTED]
Candidate Name		Category/ Type	Transaction ID : BDE374D9C2 Amount of Each Disbursement this Period [REDACTED] 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. GUIKARTE, ELVIA, , ,		Date of Disbursement M M M / D D D / Y Y Y Y Y 03 / 25 / 2021	
Mailing Address 2830 SW 110 AVENUE			
City MIAMI	State FL	Zip Code 33165	
Purpose of Disbursement CONTRIBUTION REFUND		010	FEC Identification Number C [REDACTED]
Candidate Name		Category/ Type	Transaction ID : B1D697AFC8 Amount of Each Disbursement this Period [REDACTED] 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. GUILOTT, MARIA, , ,		Date of Disbursement M M M / D D D / Y Y Y Y Y 06 / 04 / 2021	
Mailing Address 100 DEVEREAUX DRIVE			
City SLIDELL	State LA	Zip Code 70461	
Purpose of Disbursement CONTRIBUTION REFUND		010	FEC Identification Number C [REDACTED]
Candidate Name		Category/ Type	Transaction ID : B5B45E8946 Amount of Each Disbursement this Period [REDACTED] 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 160.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUINN, AUDREY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 105 N ELM ST
APT 4

City MABEL State MN Zip Code 55954

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C
Transaction ID : B06A587262I
Amount of Each Disbursement this Period: 100.00

Memo Item

B. GULDEN, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4060 EAST 356 NORTH

City RIGBY State ID Zip Code 83442

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C
Transaction ID : B4C3590C60f
Amount of Each Disbursement this Period: 35.00

Memo Item

C. GULDEN, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4060 EAST 356 NORTH

City RIGBY State ID Zip Code 83442

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C
Transaction ID : BA26151940
Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 170.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. GUNNIN, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1084 DIAMOND LAKE CIR.

City NAPLES State FL Zip Code 34114

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B08D3B746A

Amount of Each Disbursement this Period: 100.00

Memo Item

B. GUNTHER, CHARLOTTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 106 WADDELL CT

City APEX State NC Zip Code 27502

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BA9AC201DE

Amount of Each Disbursement this Period: 25.00

Memo Item

C. GUTHMILLER, JANE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 806 S MCCOY ST

City ABERDEEN State SD Zip Code 57401

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B58C31DA9A

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HADDOX, DORA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2161 VIRGINIA LAKE WAY 4619

City RENO State NV Zip Code 89509

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B73C7FD176

Amount of Each Disbursement this Period: 15.00

Memo Item

B. HADDOX, DORA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2161 VIRGINIA LAKE WAY 4619

City RENO State NV Zip Code 89509

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B155CD7C3F

Amount of Each Disbursement this Period: 15.00

Memo Item

C. HADDOX, DORA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2161 VIRGINIA LAKE WAY 4619

City RENO State NV Zip Code 89509

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B71FA1585C

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HADDOX, DORA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 2161 VIRGINIA LAKE WAY 4619		FEC Identification Number C [REDACTED] Transaction ID : BD0C0AFD7f Amount of Each Disbursement this Period 15.00
City RENO	State NV	Zip Code 89509
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HALBERDIER, DIANA, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021
Mailing Address 169 BENT TREE		FEC Identification Number C [REDACTED] Transaction ID : B8A1B623554 Amount of Each Disbursement this Period 35.00
City MONTGOMERY	State TX	Zip Code 77356
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HALBERDIER, DIANA, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021
Mailing Address 169 BENT TREE		FEC Identification Number C [REDACTED] Transaction ID : BCB434A651 Amount of Each Disbursement this Period 35.00
City MONTGOMERY	State TX	Zip Code 77356
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HALL, DOROTHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3907 KATHERINE STREET

City NASHVILLE State TN Zip Code 37216

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BC85247FB3

Amount of Each Disbursement this Period: 10.00

Memo Item

B. HALVERSON, ESTELA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 78-7206 PUULOA ROAD

City KAILUA KONA State HI Zip Code 96740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC4CA5E672

Amount of Each Disbursement this Period: 50.00

Memo Item

C. HAMEL, DAVID, A., MR,

Full Name (Last, First, Middle Initial)

Mailing Address 4260 INNSBROOK DR

City SNELLVILLE State GA Zip Code 30039

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4AE2F7745

Amount of Each Disbursement this Period: 75.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED]	
City SNELLVILLE	State GA	Zip Code 30039	Transaction ID : B89AAC3EA
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED]	
City SNELLVILLE	State GA	Zip Code 30039	Transaction ID : B66C2BF2F6
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 75.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED]	
City SNELLVILLE	State GA	Zip Code 30039	Transaction ID : B4E965BBE
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 75.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED] Transaction ID : B9F83C3901f Amount of Each Disbursement this Period [REDACTED] 35.00	
City SNELLVILLE	State GA	Zip Code 30039	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED] Transaction ID : B3A5FE478A! Amount of Each Disbursement this Period [REDACTED] 50.00	
City SNELLVILLE	State GA	Zip Code 30039	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED] Transaction ID : BA7015F931 Amount of Each Disbursement this Period [REDACTED] 35.00	
City SNELLVILLE	State GA	Zip Code 30039	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 120.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED] Transaction ID : B5FDBD7A2f Amount of Each Disbursement this Period 50.00	
City SNELLVILLE	State GA	Zip Code 30039	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. HAMEL, DAVID, A., MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4260 INNSBROOK DR		FEC Identification Number C [REDACTED] Transaction ID : BC752A5E71f Amount of Each Disbursement this Period 35.00	
City SNELLVILLE	State GA	Zip Code 30039	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. HAMM, JEFF, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 6626 BRIARCOVE		FEC Identification Number C [REDACTED] Transaction ID : B5790098B3f Amount of Each Disbursement this Period 250.00	
City DALLAS	State TX	Zip Code 75254	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	335.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAMMOND, PHILIP, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2440 BORDER LINKS DR

City VISALIA State CA Zip Code 93291

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2021

FEC Identification Number: C

Transaction ID : **BD6CE1A20A**

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. HANEL, RINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2 LARKSBERRY

City SPRING State TX Zip Code 77382

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BE57529BB8I**

Amount of Each Disbursement this Period: 10.00

Memo Item

C. HANRAHAN, KENNETH, C, ,

Full Name (Last, First, Middle Initial)

Mailing Address 76 BOND CT

City SAINT PETERS State MO Zip Code 63376

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **B7F9763CD0**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2535.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HANSMAN, MELANIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 500 NW SUNSET CT

City GRIMES State IA Zip Code 50111

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2021

FEC Identification Number: C

Transaction ID : **BB8E77B9CF**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. HANSMAN, MELANIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 500 NW SUNSET CT

City GRIMES State IA Zip Code 50111

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2021

FEC Identification Number: C

Transaction ID : **B110564E04C**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. HANSON, BILL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13564 MANCHESTER WAY

City NAPLES State FL Zip Code 34109

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BD27153D83**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: HARBER, BONNIE. Includes fields for Name, Address, City (OTTAWA), State (KS), Zip (66067), Purpose (CONTRIBUTION REFUND), and Disbursement Amount (15.00).

Form B: HARBER, BONNIE. Identical structure to Form A, including Name, Address, City, State, Zip, Purpose, and Disbursement Amount (15.00).

Form C: HARBER, BONNIE. Identical structure to Form A, including Name, Address, City, State, Zip, Purpose, and Disbursement Amount (15.00).

SUBTOTAL of Disbursements This Page (optional) 45.00
TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HARPOOL, SHIRLEY, , , CCIM		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address LA ROVERA TERR		FEC Identification Number C [REDACTED]	
City ANSONIA	State CT	Zip Code 06401	Transaction ID : BDDBA586A'
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HARPOOL, SHIRLEY, , , CCIM		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address LA ROVERA TERR		FEC Identification Number C [REDACTED]	
City ANSONIA	State CT	Zip Code 06401	Transaction ID : BC999755F80
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. HARPOOL, SHIRLEY, , , CCIM		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address LA ROVERA TERR		FEC Identification Number C [REDACTED]	
City ANSONIA	State CT	Zip Code 06401	Transaction ID : BE67FDC6F2
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HARRIS, PAULA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 19280 RED FEATHER RD

City APPLE VALLEY State CA Zip Code 92307

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B8B507C668

Amount of Each Disbursement this Period: 25.00

Memo Item

B. HARRIS, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 35 MICKEY WRIGHT WAY

City SHARPSBURG State GA Zip Code 30277

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : B7F6550BFD!

Amount of Each Disbursement this Period: 25.00

Memo Item

C. HAUCK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 196 FOX GLEN DRIVE

City NAPLES State FL Zip Code 34104

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B5D5D41DFI

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HAUCK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 196 FOX GLEN DRIVE

City NAPLES State FL Zip Code 34104

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BFB7A014BA

Amount of Each Disbursement this Period: 35.00

Memo Item

B. HAUCK, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 196 FOX GLEN DRIVE

City NAPLES State FL Zip Code 34104

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B0EA0B215C

Amount of Each Disbursement this Period: 35.00

Memo Item

C. HAYES, KIRSTEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 49 PULGRIM ROAD

City WEST HARTFORD State CT Zip Code 06117

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BEDF153F05

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HEAD, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 3684 E STATE ROAD 32		FEC Identification Number C [REDACTED] Transaction ID : B758EC137B	
City LEBANON	State IN	Zip Code 46052	Amount of Each Disbursement this Period 35.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. HEIN, GREGORY, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 4223 FORREST HILL ROAD APT 1		FEC Identification Number C [REDACTED] Transaction ID : B0A3636AF1	
City COLORADO SPRINGS	State CO	Zip Code 80907	Amount of Each Disbursement this Period 35.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. HEIN, GREGORY, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 4223 FORREST HILL ROAD APT 1		FEC Identification Number C [REDACTED] Transaction ID : B3EBCD777I	
City COLORADO SPRINGS	State CO	Zip Code 80907	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HEIN, SUSAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 151 INDIANTOWN ROAD

City GLENMOORE State PA Zip Code 19343

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B0D5447EAC

Amount of Each Disbursement this Period: 25.00

Memo Item

B. HENDERSON, WILMA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 730

City AIRWAY HEIGHTS State WA Zip Code 99001

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 19 / 2021

FEC Identification Number: C

Transaction ID : B232A7DBBF

Amount of Each Disbursement this Period: 25.00

Memo Item

C. HERBRICK, MARTI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2761 W 106TH LOOP #A

City WESTMINSTER State CO Zip Code 80234

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B099B0B3D8

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HERBRICK, MARTI, , ,		Date of Disbursement M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2021	
Mailing Address 2761 W 106TH LOOP #A			
City WESTMINSTER	State CO	Zip Code 80234	
Purpose of Disbursement CONTRIBUTION REFUND		010	FEC Identification Number C Transaction ID : B39C8C5BAF Amount of Each Disbursement this Period 35.00
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. HERBRICK, MARTI, , ,		Date of Disbursement M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2021	
Mailing Address 2761 W 106TH LOOP #A			
City WESTMINSTER	State CO	Zip Code 80234	
Purpose of Disbursement CONTRIBUTION REFUND		010	FEC Identification Number C Transaction ID : BE1C32EACC Amount of Each Disbursement this Period 35.00
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C. HERBRICK, MARTI, , ,		Date of Disbursement M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2021	
Mailing Address 2761 W 106TH LOOP #A			
City WESTMINSTER	State CO	Zip Code 80234	
Purpose of Disbursement CONTRIBUTION REFUND		010	FEC Identification Number C Transaction ID : B1EFA2693C Amount of Each Disbursement this Period 35.00
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional).....▶		105.00	
TOTAL This Period (last page this line number only).....▶			

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HERMAN, TODD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2239 N LOCH LOMOND CT

City WICHITA State KS Zip Code 67228

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BE45D954A3

Amount of Each Disbursement this Period: 100.00

Memo Item

B. HERRICK, ALICE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 702 EAST BLUE HILL RD

City BLUE HILL State ME Zip Code 04614

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2021

FEC Identification Number: C

Transaction ID : BC18BEFB78

Amount of Each Disbursement this Period: 250.00

Memo Item

C. HERTZOG, SALINDA, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 100 N 6TH ST

City DENVER State PA Zip Code 17517

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2021

FEC Identification Number: C

Transaction ID : B93BEC35E!

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 365.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HILDEBRANDT, PAT, , ,		Date of Disbursement MM / DD / YYYY 03 / 23 / 2021	
Mailing Address 61858 248TH AVE		FEC Identification Number C [REDACTED]	
City MANTORVILLE	State MN	Zip Code 55955	Transaction ID : B890AF1E29
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HILDER, JOYCE, , ,		Date of Disbursement MM / DD / YYYY 03 / 01 / 2021	
Mailing Address 7009 CREFT CIR		FEC Identification Number C [REDACTED]	
City INDIAN TRAIL	State NC	Zip Code 28079	Transaction ID : B5231BBD41
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 10.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. HILDER, JOYCE, , ,		Date of Disbursement MM / DD / YYYY 03 / 01 / 2021	
Mailing Address 7009 CREFT CIR		FEC Identification Number C [REDACTED]	
City INDIAN TRAIL	State NC	Zip Code 28079	Transaction ID : B19B33B53E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 10.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HILDER, JOYCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7009 CREFT CIR

City INDIAN TRAIL State NC Zip Code 28079

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2021

FEC Identification Number: C

Transaction ID : B461633F162

Amount of Each Disbursement this Period: 10.00

Memo Item

B. HILL, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3802 VINEYARDS LAKE CIRCLE NE

City KENNESAW State GA Zip Code 30144

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1D67D25A9I

Amount of Each Disbursement this Period: 5.00

Memo Item

C. HILL, EDDIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2015 CO RD 233

City NEW BROCKTON State AL Zip Code 36351

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6B015CB4I

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HILL, EDDIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2015 CO RD 233

City NEW BROCKTON State AL Zip Code 36351

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BFD FDD19A1

Amount of Each Disbursement this Period: 50.00

Memo Item

B. HILL, EDDIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2015 CO RD 233

City NEW BROCKTON State AL Zip Code 36351

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BB78F17FE3!

Amount of Each Disbursement this Period: 50.00

Memo Item

C. HILSMAN, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 276277

City SAN ANTONIO State TX Zip Code 07827

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2021

FEC Identification Number: C

Transaction ID : BF12B14F99

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 115.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HINKLE, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9 N COUNTRY LAKES DRIVE

City MARLTON State NJ Zip Code 08053

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B99C5D4B01

Amount of Each Disbursement this Period: 100.00

Memo Item

B. HOFFER, DAWN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7062 DUNSTANS LANE

City TOLEDO State OH Zip Code 43617

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B4F4D750D5I

Amount of Each Disbursement this Period: 50.00

Memo Item

C. HOFFMAN, LYNNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 535 WILLOW KNOLL DRIVE

City MARIETTA State GA Zip Code 30067

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B7BA8D6A0,

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 185.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOKE, HAROLD, W., ,

Full Name (Last, First, Middle Initial)

Mailing Address 3846 11TH ST SW APT 2005

City CANTON State OH Zip Code 44710

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 06 / 2021

FEC Identification Number: C

Transaction ID : B262EB49C7

Amount of Each Disbursement this Period: 20.00

Memo Item

B. HOLLEY, SHERREL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4502A N CR 1700

City SHALLOWATER State TX Zip Code 79363

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B3E46A0B9A

Amount of Each Disbursement this Period: 25.00

Memo Item

C. HOLMES, JAMES, , , JR

Full Name (Last, First, Middle Initial)

Mailing Address 15452 ADLONG DRIVE

City ROANOKE State TX Zip Code 76262

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BEE4075F4C

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HORNBECK, KAREN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2179 EDISTO AVE.		FEC Identification Number C [REDACTED]	
City CHARLESTON	State SC	Zip Code 29412	Transaction ID : B9837B768B
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HORNBECK, KAREN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2179 EDISTO AVE.		FEC Identification Number C [REDACTED]	
City CHARLESTON	State SC	Zip Code 29412	Transaction ID : B59CE7EA79
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. HORNBECK, KAREN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2179 EDISTO AVE.		FEC Identification Number C [REDACTED]	
City CHARLESTON	State SC	Zip Code 29412	Transaction ID : B972E3AF57
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HORNER, TREVA, , ,		Date of Disbursement MM / DD / YYYY 01 / 19 / 2021	
Mailing Address 7020 MEADOW BROOK CT		FEC Identification Number C [REDACTED] Transaction ID : B81C0F7A0C Amount of Each Disbursement this Period [REDACTED] 35.00	
City CUMMING	State GA	Zip Code 30040	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. HOULE, ROSALBA, , ,		Date of Disbursement MM / DD / YYYY 02 / 08 / 2021	
Mailing Address 240 BRIARGATE WAY		FEC Identification Number C [REDACTED] Transaction ID : B405D1AC6E Amount of Each Disbursement this Period [REDACTED] 100.00	
City COOKEVILLE	State TN	Zip Code 38501	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. HOUSTON, TERRY, , ,		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021	
Mailing Address 122 MCINTOSH RD		FEC Identification Number C [REDACTED] Transaction ID : B9BB44816A Amount of Each Disbursement this Period [REDACTED] 35.00	
City LEESBURG	State GA	Zip Code 31763	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 170.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HOUSTON, TERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 122 MCINTOSH RD

City LEESBURG State GA Zip Code 31763

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2021

FEC Identification Number: C

Transaction ID : B4B07A7AE3

Amount of Each Disbursement this Period: 35.00

Memo Item

B. HOWARD, LAVONNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7459 LEESIDE DRIVE

City BLAINE State WA Zip Code 98230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : B4B316DD23

Amount of Each Disbursement this Period: 35.00

Memo Item

C. HOWE, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 612 LONGFELLOW WAY

City SIMPSONVILLE State SC Zip Code 29681

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B3B6F1A1A1

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUBBARD, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 173

City LAS CRUCES State NM Zip Code 88004

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BDC63918F1

Amount of Each Disbursement this Period: 20.00

Memo Item

B. HUFF, CHRISTOPHER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1831 COLLEGE ST

City SOUTH BEND State IN Zip Code 46628

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BE249940D31

Amount of Each Disbursement this Period: 100.00

Memo Item

C. HUGGER, JONATHAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16510 N 92ND ST 1004

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B9B7461B45

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 155.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUGGER, JONATHAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16510 N 92ND ST
1004

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BF5B47F7BD**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. HUGHES, MIKE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 20823 NORMANDIE AVE

City TORRANCE State CA Zip Code 90501

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B8B471B540**

Amount of Each Disbursement this Period: 20.20

Memo Item

C. HUGO, MANUEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 124 JOCKEY HOLLOWAY

City UNION State NJ Zip Code 07083

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BBE2A07665**

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 155.20

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. HUUKI, DAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 46304 LARSON RD.

City ATLANTIC MINE State MI Zip Code 49905

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BFB6084A5E

Amount of Each Disbursement this Period: 35.00

Memo Item

B. IEZZI, JOE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 110 GRAVES RD.

City OXFORD State PA Zip Code 19363

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B6B78A68FE:

Amount of Each Disbursement this Period: 50.00

Memo Item

C. INGEGNO, ALFRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 251 TURN OF RIVER RD
231

City STAMFORD State CT Zip Code 06905

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B239691E1F:

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. INGEGNO, ALFRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 251 TURN OF RIVER RD
231

City STAMFORD State CT Zip Code 06905

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4F85153B9f

Amount of Each Disbursement this Period: 35.00

Memo Item

B. IRWIN, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 263 MEADOWLARK COURT

City MARCO ISLAND State FL Zip Code 34145

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B781DA4454f

Amount of Each Disbursement this Period: 50.00

Memo Item

C. JACKSON, ELIZABETH, , MRS.,

Full Name (Last, First, Middle Initial)

Mailing Address 287 MCQUEEN DRIVE

City POOLER State GA Zip Code 31322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B31078944Bf

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. JAMES, VICKIE, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 790 DEER LODGE CT		FEC Identification Number C [REDACTED] Transaction ID : BF6E8EB2D2 Amount of Each Disbursement this Period [REDACTED] 35.00	
City SILOAM SPRINGS	State AR	Zip Code 72761	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. JANICE, BRENDA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 43 N LACLEDE PLACE		FEC Identification Number C [REDACTED] Transaction ID : B2A3D52555f Amount of Each Disbursement this Period [REDACTED] 50.00	
City ATLANTIC CITY	State NJ	Zip Code 08401	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. JANICE, BRENDA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 43 N LACLEDE PLACE		FEC Identification Number C [REDACTED] Transaction ID : BC4BBD6F9: Amount of Each Disbursement this Period [REDACTED] 50.00	
City ATLANTIC CITY	State NJ	Zip Code 08401	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 135.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. JANICE, BRENDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 43 N LACLEDE PLACE		FEC Identification Number C [REDACTED] Transaction ID : BD153ADE99 Amount of Each Disbursement this Period 50.00	
City ATLANTIC CITY	State NJ	Zip Code 08401	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. JAQUISH, DANIEL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 5720 NORTH W ST		FEC Identification Number C [REDACTED] Transaction ID : B266539CCA1 Amount of Each Disbursement this Period 100.00	
City PENSACOLA	State FL	Zip Code 32505	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. JAQUISH, DANIEL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 5720 NORTH W ST		FEC Identification Number C [REDACTED] Transaction ID : B8E30B28C3 Amount of Each Disbursement this Period 100.00	
City PENSACOLA	State FL	Zip Code 32505	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JAQUISH, DANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5720 NORTH W ST

City PENSACOLA State FL Zip Code 32505

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDB987E08E

Amount of Each Disbursement this Period: 100.00

Memo Item

B. JAQUISH, DANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5720 NORTH W ST

City PENSACOLA State FL Zip Code 32505

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1FB9BB95E

Amount of Each Disbursement this Period: 100.00

Memo Item

C. JERRY, MELENIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 35 BROOKFIELD AVE

City FAIRFIELD State CT Zip Code 06825

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2C198C5BE

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 210.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JERRY, MELENIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 35 BROOKFIELD AVE

City FAIRFIELD State CT Zip Code 06825

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6D61B4B96

Amount of Each Disbursement this Period: 25.00

Memo Item

B. JIMENEZ, BERKIS, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 3211 , SANTA CATALINA PLACE

City GREENACRES State FL Zip Code 33467

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B09A1D94F9

Amount of Each Disbursement this Period: 50.00

Memo Item

C. JIMENEZ, BERKIS, M, ,

Full Name (Last, First, Middle Initial)

Mailing Address 3211 , SANTA CATALINA PLACE

City GREENACRES State FL Zip Code 33467

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BD9D2EDF2

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. JOHNSON, MARILYN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 561 E. WILDFIRE ROSE LANE		FEC Identification Number C [REDACTED] Transaction ID : BEEA96DC81 Amount of Each Disbursement this Period [REDACTED] 30.00	
City SANDY	State UT	Zip Code 84070	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. JOHNSON, MARILYN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 561 E. WILDFIRE ROSE LANE		FEC Identification Number C [REDACTED] Transaction ID : B2D82E0CFF Amount of Each Disbursement this Period [REDACTED] 30.00	
City SANDY	State UT	Zip Code 84070	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. JONES, ANNETTE, , ,		Date of Disbursement MM / DD / YYYY 03 / 04 / 2021	
Mailing Address 9119 173RD AVE SW		FEC Identification Number C [REDACTED] Transaction ID : BB82325611 Amount of Each Disbursement this Period [REDACTED] 15.00	
City ROCHESTER	State WA	Zip Code 98579	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 75.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. JONES, ANNETTE, , ,		Date of Disbursement MM / DD / YYYY 03 / 04 / 2021	
Mailing Address 9119 173RD AVE SW		FEC Identification Number C [REDACTED] Transaction ID : B0E5D43481I Amount of Each Disbursement this Period 15.00	
City ROCHESTER	State WA	Zip Code 98579	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. JONES, DAWN, R, ,		Date of Disbursement MM / DD / YYYY 02 / 01 / 2021	
Mailing Address 3673 NW WISTERIA PL		FEC Identification Number C [REDACTED] Transaction ID : BE9C3DB292 Amount of Each Disbursement this Period 50.00	
City CORVALLIS	State OR	Zip Code 97330	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. JONES, DAWN, R, ,		Date of Disbursement MM / DD / YYYY 02 / 01 / 2021	
Mailing Address 3673 NW WISTERIA PL		FEC Identification Number C [REDACTED] Transaction ID : BD4286E449 Amount of Each Disbursement this Period 50.00	
City CORVALLIS	State OR	Zip Code 97330	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. JONES, FRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 20602 LINDEMAN LANE

City LEANDER State TX Zip Code 78641

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : **BD207BE7BE**

Amount of Each Disbursement this Period: 100.00

Memo Item

B. JONES, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8425 OLD ELM COVE

City GERMANTOWN State TN Zip Code 38138

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : **B4012812174**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. JONES, RICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8425 OLD ELM COVE

City GERMANTOWN State TN Zip Code 38138

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B1D271BF7L**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 185.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. JORGENSEN, KAREN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 2925 PARKVIEW DR		FEC Identification Number C [REDACTED] Transaction ID : B34F9879AD Amount of Each Disbursement this Period 100.00
City MODESTO	State CA	Zip Code 95355
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KAHN, JAN, , ,		Date of Disbursement MM / DD / YYYY 04 / 06 / 2021
Mailing Address 2590 SAN REMO DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B96325224E7 Amount of Each Disbursement this Period 25.00
City PACIFIC PALISADES	State CA	Zip Code 90272
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. KAHN, JAN, , ,		Date of Disbursement MM / DD / YYYY 04 / 06 / 2021
Mailing Address 2590 SAN REMO DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B4871148CD Amount of Each Disbursement this Period 25.00
City PACIFIC PALISADES	State CA	Zip Code 90272
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAIAMA, VICTORIA, L, ,

Full Name (Last, First, Middle Initial)

Mailing Address 94-944 LUMIMOE STREET

City WAIPAHU State HI Zip Code 96797

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BA6941993E!

Amount of Each Disbursement this Period: 100.00

Memo Item

B. KAIN, NANCY, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 608 PARKSIDE VILLAGE WAY NW

City MARIETTA State GA Zip Code 30060

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2021

FEC Identification Number: C

Transaction ID : B97D7D65A1!

Amount of Each Disbursement this Period: 25.00

Memo Item

C. KAIN, NANCY, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 608 PARKSIDE VILLAGE WAY NW

City MARIETTA State GA Zip Code 30060

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2021

FEC Identification Number: C

Transaction ID : BB76B79447

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KAIN, NANCY, , MS,		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021	
Mailing Address 608 PARKSIDE VILLAGE WAY NW		FEC Identification Number C [REDACTED] Transaction ID : B7313A6406/ Amount of Each Disbursement this Period 25.00	
City MARIETTA	State GA	Zip Code 30060	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. KAIN, NANCY, , MS,		Date of Disbursement MM / DD / YYYY 04 / 27 / 2021	
Mailing Address 608 PARKSIDE VILLAGE WAY NW		FEC Identification Number C [REDACTED] Transaction ID : B8B02919E0C Amount of Each Disbursement this Period 25.00	
City MARIETTA	State GA	Zip Code 30060	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. KAMINAR, MARK, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 117 TALL GRASS DR		FEC Identification Number C [REDACTED] Transaction ID : BEC9C215E4 Amount of Each Disbursement this Period 100.00	
City WAYNE	State NJ	Zip Code 07470	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KAMINSKI, BEVERLY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 6110 MISSION WAY		FEC Identification Number C [REDACTED] Transaction ID : B2DFC87976: Amount of Each Disbursement this Period 15.00	
City MANHATTAN	State MT	Zip Code 59741	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. KAMINSKI, BEVERLY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 6110 MISSION WAY		FEC Identification Number C [REDACTED] Transaction ID : B4E9E2986B: Amount of Each Disbursement this Period 15.00	
City MANHATTAN	State MT	Zip Code 59741	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. KAMINSKI, BEVERLY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 6110 MISSION WAY		FEC Identification Number C [REDACTED] Transaction ID : BB244A6F58 Amount of Each Disbursement this Period 35.00	
City MANHATTAN	State MT	Zip Code 59741	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KAMINSKI, BEVERLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6110 MISSION WAY

City MANHATTAN State MT Zip Code 59741

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BD30AEC891**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. KARAM, KAREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 890 STARLIGHT DR

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 28 / 2021

FEC Identification Number: C

Transaction ID : **B5ED904A3A**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. KARAM, KAREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 890 STARLIGHT DR

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 28 / 2021

FEC Identification Number: C

Transaction ID : **B0654D513F**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 115.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KARANIEWSKY, ZANDRA, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 1401 S OCEAN BLVD 601		FEC Identification Number C [REDACTED] Transaction ID : B1AE964F0A Amount of Each Disbursement this Period 10.00
City POMPANO BEACH	State FL	Zip Code 33062
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KATZ, CYNDI, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 1908 PIERCE AVE.		FEC Identification Number C [REDACTED] Transaction ID : B35F72658C3 Amount of Each Disbursement this Period 50.00
City CAMBRIA	State CA	Zip Code 93428
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. KAYROUZ, TANNOUS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 177 NORTH STREET		FEC Identification Number C [REDACTED] Transaction ID : B6E3D853A4 Amount of Each Disbursement this Period 250.00
City UPTON	State MA	Zip Code 01568
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

310.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEARNS, HOWARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3341 GAY ST

City FORT WORTH State TX Zip Code 76111

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : B4F03C917A

Amount of Each Disbursement this Period: 10.00

Memo Item

B. KEEVEN, DEB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12077 DECKS PRAIRIE LN

City HIGHLAND State IL Zip Code 62249

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1F3A8FE64

Amount of Each Disbursement this Period: 15.00

Memo Item

C. KEEVEN, DEB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12077 DECKS PRAIRIE LN

City HIGHLAND State IL Zip Code 62249

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : B71C9217D4

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KEEVEN, DEB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12077 DECKS PRAIRIE LN

City HIGHLAND State IL Zip Code 62249

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : B03E6C7B06

Amount of Each Disbursement this Period: 15.00

Memo Item

B. KELLER, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3273 PIN OAK CIR

City ATLANTA State GA Zip Code 30340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B945C75FEC

Amount of Each Disbursement this Period: 50.00

Memo Item

C. KELSEY, GORDON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3901 OXFORD NW

City MASSILLON State OH Zip Code 44646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2021

FEC Identification Number: C

Transaction ID : B4B2D090C

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 80.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KELSEY, GORDON, , ,		Date of Disbursement MM / DD / YYYY 02 / 12 / 2021	
Mailing Address 3901 OXFORD NW		FEC Identification Number C [REDACTED]	
City MASSILLON	State OH	Zip Code 44646	Transaction ID : BEEFF9F314
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. KELSEY, GORDON, , ,		Date of Disbursement MM / DD / YYYY 02 / 12 / 2021	
Mailing Address 3901 OXFORD NW		FEC Identification Number C [REDACTED]	
City MASSILLON	State OH	Zip Code 44646	Transaction ID : BF4A4665409
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. KELSEY, GORDON, , ,		Date of Disbursement MM / DD / YYYY 02 / 12 / 2021	
Mailing Address 3901 OXFORD NW		FEC Identification Number C [REDACTED]	
City MASSILLON	State OH	Zip Code 44646	Transaction ID : B044FAED53
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KELSEY, GORDON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3901 OXFORD NW

City MASSILLON State OH Zip Code 44646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2021

FEC Identification Number: C

Transaction ID : B3F596C69B

Amount of Each Disbursement this Period: 15.00

Memo Item

B. KELSEY, GORDON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3901 OXFORD NW

City MASSILLON State OH Zip Code 44646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2021

FEC Identification Number: C

Transaction ID : BC168560AE

Amount of Each Disbursement this Period: 15.00

Memo Item

C. KELSEY, GORDON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3901 OXFORD NW

City MASSILLON State OH Zip Code 44646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2021

FEC Identification Number: C

Transaction ID : BD912B7F76

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KELSEY, GORDON, , ,		Date of Disbursement MM / DD / YYYY 02 / 12 / 2021	
Mailing Address 3901 OXFORD NW		FEC Identification Number C [REDACTED] Transaction ID : B42ADE21A2	
City MASSILLON	State OH	Zip Code 44646	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. KELSEY, GORDON, , ,		Date of Disbursement MM / DD / YYYY 02 / 12 / 2021	
Mailing Address 3901 OXFORD NW		FEC Identification Number C [REDACTED] Transaction ID : B2A47332D21	
City MASSILLON	State OH	Zip Code 44646	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. KELSEY, GORDON, , ,		Date of Disbursement MM / DD / YYYY 02 / 12 / 2021	
Mailing Address 3901 OXFORD NW		FEC Identification Number C [REDACTED] Transaction ID : BA19D50441	
City MASSILLON	State OH	Zip Code 44646	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KELSEY, GORDON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3901 OXFORD NW

City MASSILLON State OH Zip Code 44646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : **BD1157CA6E**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. KEMP, RHONDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1043 E CLEARLAKE ST

City DERBY State KS Zip Code 67037

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BE1D845238E**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. KENNEY, JEREMY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7300 RIPPON RD

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 22 / 2021

FEC Identification Number: C

Transaction ID : **B1811B31CE**

Amount of Each Disbursement this Period: 1.01

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 41.01

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEY, JEREMY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7300 RIPPON RD

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : B3823FB697f

Amount of Each Disbursement this Period: 1.00

Memo Item

B. KENNEY, JEREMY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7300 RIPPON RD

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : BAB6B97156:

Amount of Each Disbursement this Period: 1.00

Memo Item

C. KENNEY, JEREMY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7300 RIPPON RD

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : B5DAF1E5C:

Amount of Each Disbursement this Period: 1.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KENNEY, JEREMY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7300 RIPPON RD

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : BCD599B100

Amount of Each Disbursement this Period: 1.27

Memo Item

B. KENNEY, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1433 MARKET

City ASHLAND State PA Zip Code 17921

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDA90E205F

Amount of Each Disbursement this Period: 35.00

Memo Item

C. KERN, CURTIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2175 AWIKIWIKI STREET

City PEARL CITY State HI Zip Code 96782

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B78242DC2E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 86.27

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KESSINGER, VICKI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 281 SOMMER ST

City NORTH TONAWANDA State NY Zip Code 14120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : BCDF4E4DDI

Amount of Each Disbursement this Period: 5.00

Memo Item

B. KESSINGER, VICKI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 281 SOMMER ST

City NORTH TONAWANDA State NY Zip Code 14120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : BDCA485D71

Amount of Each Disbursement this Period: 5.00

Memo Item

C. KESSINGER, VICKI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 281 SOMMER ST

City NORTH TONAWANDA State NY Zip Code 14120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : BACF0657DI

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KESSINGER, VICKI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 281 SOMMER ST

City NORTH TONAWANDA State NY Zip Code 14120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : B6483A671B1

Amount of Each Disbursement this Period: 5.00

Memo Item

B. KESSINGER, VICKI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 281 SOMMER ST

City NORTH TONAWANDA State NY Zip Code 14120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : BAB5F2F35B

Amount of Each Disbursement this Period: 5.00

Memo Item

C. KESSINGER, VICKI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 281 SOMMER ST

City NORTH TONAWANDA State NY Zip Code 14120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : BD614A6F6E

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KIESEWETTER, CARRIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 810 FISCHER RD.

City CREVE COEUR State IL Zip Code 61610

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2021

FEC Identification Number: C

Transaction ID : B3B77CFE28

Amount of Each Disbursement this Period: 35.00

Memo Item

B. KIESZEK, LARRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6302 NW 18TH AVE 0

City GAINESVILLE State FL Zip Code 32605

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE2A5890629

Amount of Each Disbursement this Period: 100.00

Memo Item

C. KILLEAVY, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 CROSS STREET

City BRISTOL State RI Zip Code 02809

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BD733C8C57

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 185.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KILLEAVY, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 CROSS STREET

City BRISTOL State RI Zip Code 02809

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE96B1D1F6

Amount of Each Disbursement this Period: 25.00

Memo Item

B. KING, SIDNEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 664 HILLENDALE RD

City AVONDALE State PA Zip Code 19311

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B8663FE9814

Amount of Each Disbursement this Period: 25.00

Memo Item

C. KING, SIDNEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 664 HILLENDALE RD

City AVONDALE State PA Zip Code 19311

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B442B95395I

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KING, SIDNEY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 664 HILLENDALE RD		FEC Identification Number C [REDACTED] Transaction ID : B86BC0967E Amount of Each Disbursement this Period 25.00	
City AVONDALE	State PA	Zip Code 19311	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. KITCHENS, JERRY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 429 SUNSET DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B13491E56B3 Amount of Each Disbursement this Period 100.00	
City BIRMINGHAM	State AL	Zip Code 35216	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. KLEBBA-GOODMAN, AUDREY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4145 ZIMMER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B5543D280E Amount of Each Disbursement this Period 25.00	
City WILLIAMSTON	State MI	Zip Code 48895	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KLEBBA-GOODMAN, AUDREY, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4145 ZIMMER ROAD			FEC Identification Number C [REDACTED] Transaction ID : BB93E67A26 Amount of Each Disbursement this Period [REDACTED] 25.00	
City WILLIAMSTON	State MI	Zip Code 48895	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: _____ District: _____				
Full Name (Last, First, Middle Initial) B. KLEBBA-GOODMAN, AUDREY, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4145 ZIMMER ROAD			FEC Identification Number C [REDACTED] Transaction ID : B5D66851C1f Amount of Each Disbursement this Period [REDACTED] 35.00	
City WILLIAMSTON	State MI	Zip Code 48895	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: _____ District: _____				
Full Name (Last, First, Middle Initial) C. KLEBBA-GOODMAN, AUDREY, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4145 ZIMMER ROAD			FEC Identification Number C [REDACTED] Transaction ID : B32B6E9764 Amount of Each Disbursement this Period [REDACTED] 25.00	
City WILLIAMSTON	State MI	Zip Code 48895	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: _____ District: _____				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 85.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KLEBBA-GOODMAN, AUDREY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4145 ZIMMER ROAD		FEC Identification Number C [REDACTED] Transaction ID : BBC309CA1C Amount of Each Disbursement this Period [REDACTED] 35.00	
City WILLIAMSTON	State MI	Zip Code 48895	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. KLEBBA-GOODMAN, AUDREY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4145 ZIMMER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B6C5B2F26E: Amount of Each Disbursement this Period [REDACTED] 35.00	
City WILLIAMSTON	State MI	Zip Code 48895	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. KLEBBA-GOODMAN, AUDREY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4145 ZIMMER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B8C75AC6F4 Amount of Each Disbursement this Period [REDACTED] 25.00	
City WILLIAMSTON	State MI	Zip Code 48895	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 95.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KLINE, DOROTHY, , ,		Date of Disbursement MM / DD / YYYY 01 / 21 / 2021	
Mailing Address 13342 WOLFVILLE RD		FEC Identification Number C [REDACTED] Transaction ID : B62073B4457 Amount of Each Disbursement this Period 10.00	
City SMITHSBURG	State MD	Zip Code 21783	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. KLINE, DOROTHY, , ,		Date of Disbursement MM / DD / YYYY 01 / 21 / 2021	
Mailing Address 13342 WOLFVILLE RD		FEC Identification Number C [REDACTED] Transaction ID : BEA039D321' Amount of Each Disbursement this Period 10.00	
City SMITHSBURG	State MD	Zip Code 21783	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. KLINE, DOROTHY, , ,		Date of Disbursement MM / DD / YYYY 01 / 21 / 2021	
Mailing Address 13342 WOLFVILLE RD		FEC Identification Number C [REDACTED] Transaction ID : B6560E6D98 Amount of Each Disbursement this Period 25.00	
City SMITHSBURG	State MD	Zip Code 21783	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

45.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: KLOUMANN, CASSANDRA, , ,
Mailing Address 2 FOREST WAY
City ORLEANS State MA Zip Code 02653
Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other
State: District:
Date of Disbursement: 02 / 24 / 2021
FEC Identification Number: C
Transaction ID: B605A085AE
Amount of Each Disbursement this Period: 15.00
Memo Item: []

Form B: KNECHT, JUDITH, , ,
Mailing Address 526 N 192ND ST APT 314
City SEATTLE State WA Zip Code 98133
Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other
State: District:
Date of Disbursement: 03 / 17 / 2021
FEC Identification Number: C
Transaction ID: BAE7D029DA
Amount of Each Disbursement this Period: 35.00
Memo Item: []

Form C: KNECHT, JUDITH, , ,
Mailing Address 526 N 192ND ST APT 314
City SEATTLE State WA Zip Code 98133
Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other
State: District:
Date of Disbursement: 03 / 17 / 2021
FEC Identification Number: C
Transaction ID: B6612BABC;
Amount of Each Disbursement this Period: 35.00
Memo Item: []

SUBTOTAL of Disbursements This Page (optional)..... 85.00
TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KNIFFING, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14940 OAK CREEK RD

City EL CAJON State CA Zip Code 92021

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6A9C3C580

Amount of Each Disbursement this Period: 100.00

Memo Item

B. KNIFFING, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14940 OAK CREEK RD

City EL CAJON State CA Zip Code 92021

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B55263FF9EE

Amount of Each Disbursement this Period: 100.00

Memo Item

C. KNIFFING, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14940 OAK CREEK RD

City EL CAJON State CA Zip Code 92021

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BFC0A80A7E

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KNUPP, KEITH, , ,		Date of Disbursement MM / DD / YYYY 02 / 16 / 2021
Mailing Address 5101 S CHESTNUT AVE		FEC Identification Number C [REDACTED] Transaction ID : B9D4DD4204 Amount of Each Disbursement this Period 15.00
City BROKEN ARROW	State OK	Zip Code 74011
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KOPNICKY, ALAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 52952 STATE ROUTE 18		FEC Identification Number C [REDACTED] Transaction ID : B1ED9568B7: Amount of Each Disbursement this Period 100.00
City NEW LONDON	State OH	Zip Code 44851
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. KORANSKY, CLAUDIA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 3103 292ND STREET S		FEC Identification Number C [REDACTED] Transaction ID : B270FB77B9 Amount of Each Disbursement this Period 100.00
City ROY	State WA	Zip Code 98580
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

215.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. KORF, RON, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 500 WEST 8TH AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BB6477FA5A Amount of Each Disbursement this Period 100.00
City YUMA	State CO	Zip Code 80759
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. KOSKEY, KENNETH, , ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2021
Mailing Address 903 43RD ST SW 103		FEC Identification Number C [REDACTED] Transaction ID : BAB7A6DDBI Amount of Each Disbursement this Period 25.00
City FARGO, ND	State ND	Zip Code 58103
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. KOSTBAR, JULIA, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 32 GORDON'S CORNER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B88A21EFD1 Amount of Each Disbursement this Period 50.00
City MANALAPAN	State NJ	Zip Code 07726-3751
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

175.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KOWALSKI, TRACY, L, ,

Full Name (Last, First, Middle Initial)

Mailing Address 11163 36TH STREET S

City SCOTTS State MI Zip Code 49088

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2021

FEC Identification Number: C

Transaction ID : B587C0B3E7

Amount of Each Disbursement this Period: 35.00

Memo Item

B. KROMER, CHRISTINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1483 212 STREET

City BAYSIDE State NY Zip Code 11360

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C

Transaction ID : BA3E3F9F337

Amount of Each Disbursement this Period: 5.00

Memo Item

C. KRUCKENBERG, ANGIE, , MRS,

Full Name (Last, First, Middle Initial)

Mailing Address 1116 SUNNYSIDE DR

City KALISPELL State MT Zip Code 59901

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : B60EDAA6B

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 140.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. KRUCKENBERG, ANGIE, , MRS,

Full Name (Last, First, Middle Initial)

Mailing Address 1116 SUNNYSIDE DR

City KALISPELL State MT Zip Code 59901

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2021

FEC Identification Number: C

Transaction ID : B8D0AFABE/

Amount of Each Disbursement this Period: 50.00

Memo Item

B. KUYKENDALL, MARLIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 704 FAIRWAY RIDGE COURT

City SUN CITY CENTER State FL Zip Code 33573

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : B8094CD08C/

Amount of Each Disbursement this Period: 35.00

Memo Item

C. LABOCKI, MARCY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3083 DEEDS ROAD

City GRANVILLE State OH Zip Code 43023

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B8B49A870C/

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LABOCKI, MARCY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3083 DEEDS ROAD		FEC Identification Number C [REDACTED] Transaction ID : B414219CF4 Amount of Each Disbursement this Period [REDACTED] 35.00	
City GRANVILLE	State OH	Zip Code 43023	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. LAFRENIERE, JANICE, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 5733 DAVIS CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : BD752261C2 Amount of Each Disbursement this Period [REDACTED] 35.00	
City ROHNERT PARK	State CA	Zip Code 94928	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. LAFRENIERE, JANICE, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 5733 DAVIS CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B01FE5F6EA Amount of Each Disbursement this Period [REDACTED] 35.00	
City ROHNERT PARK	State CA	Zip Code 94928	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LARIC, MARY, C., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2111 E BELTLINE RD
166A

City RICHARDSON State TX Zip Code 75081

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : B79BB8012D
Amount of Each Disbursement this Period: 25.00

Memo Item

B. LARSON, KIM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16822 124TH AVE. CT E

City PUYALLUP State WA Zip Code 98374

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : BD897B1CA9
Amount of Each Disbursement this Period: 250.00

Memo Item

C. LATHAM, LARRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1720 N. DOWELL ROAD

City AMARILLO State TX Zip Code 79124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C
Transaction ID : BDD61CBB0
Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 325.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LAUENSTEIN, LINDA, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 02 / 24 / 2021	
Mailing Address 940 HUNTSWOOD WAY		FEC Identification Number C [REDACTED] Transaction ID : B5D76B3AF6 Amount of Each Disbursement this Period [REDACTED] 25.00	
City OXNARD	State CA	Zip Code 93030	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. LAWLER, JOHNNY, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 12 / 2021	
Mailing Address 314 OAKHILL AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B90307949E0 Amount of Each Disbursement this Period [REDACTED] 50.00	
City SHEFFIELD	State AL	Zip Code 35660	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. LAWLER, JOHNNY, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 12 / 2021	
Mailing Address 314 OAKHILL AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B897F76840f Amount of Each Disbursement this Period [REDACTED] 50.00	
City SHEFFIELD	State AL	Zip Code 35660	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶	[REDACTED] 125.00
TOTAL This Period (last page this line number only)..... ▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LAWSON, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021
Mailing Address PO BOX 1092		FEC Identification Number C Transaction ID : B47ABF91DC Amount of Each Disbursement this Period 300.00
City FOREST CITY	State NC	
Purpose of Disbursement CONTRIBUTION REFUND		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 010	

Full Name (Last, First, Middle Initial) B. LE, DIEN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 106 S. BROADVIEW ST.		FEC Identification Number C Transaction ID : BCB4704A60 Amount of Each Disbursement this Period 25.00
City ANAHEIM	State CA	
Purpose of Disbursement CONTRIBUTION REFUND		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 010	

Full Name (Last, First, Middle Initial) C. LEE, ANTHONY, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 11144 CEDAR PARK AVE		FEC Identification Number C Transaction ID : B80261E7211 Amount of Each Disbursement this Period 25.00
City BATON ROUGE	State LA	
Purpose of Disbursement CONTRIBUTION REFUND		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 010	

SUBTOTAL of Disbursements This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEE, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11144 CEDAR PARK AVE

City BATON ROUGE State LA Zip Code 70809

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BEF19844AA

Amount of Each Disbursement this Period: 35.00

Memo Item

B. LEE, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11144 CEDAR PARK AVE

City BATON ROUGE State LA Zip Code 70809

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B79CEC41E1

Amount of Each Disbursement this Period: 25.00

Memo Item

C. LEE, ANTHONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11144 CEDAR PARK AVE

City BATON ROUGE State LA Zip Code 70809

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BA2A211003

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LEE, ANTHONY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 11144 CEDAR PARK AVE		FEC Identification Number C [REDACTED] Transaction ID : BD648A07CD Amount of Each Disbursement this Period 35.00
City BATON ROUGE	State LA	Zip Code 70809
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. LEE, NANCY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 535 NORTH MICHIGAN AVE 2305		FEC Identification Number C [REDACTED] Transaction ID : B2787BF2B2I Amount of Each Disbursement this Period 50.00
City CHICAGO	State IL	Zip Code 60611
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. LEE, SANDY, , ,		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021
Mailing Address 8406 FRONTERA CIR		FEC Identification Number C [REDACTED] Transaction ID : BFD029E3D2 Amount of Each Disbursement this Period 50.00
City JACKSONVILLE	State FL	Zip Code 32217
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEE, SANDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8406 FRONTERA CIR

City JACKSONVILLE State FL Zip Code 32217

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C

Transaction ID : B78EBFDE3E

Amount of Each Disbursement this Period: 50.00

Memo Item

B. LEITH, BOB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 154

City NORTH LIBRUTY State MI Zip Code 01864

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2021

FEC Identification Number: C

Transaction ID : B93A22306E

Amount of Each Disbursement this Period: 5.00

Memo Item

C. LEMMONS, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 500 COLORADO ST

City KELSO State WA Zip Code 98626

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B1BF29E05E

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 255.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LENELL, MATT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8245 CEDAR LANDING CT

City ALEXANDRIA State VA Zip Code 22306

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BF68D13BF0**

Amount of Each Disbursement this Period: 1.00

Memo Item

B. LE, TUYET, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2320 E WOODLAND DR

City PHOENIX State AZ Zip Code 85048

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B62FAE44EE**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. LEVIN, STEPHEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12274 1ST ST. W.
2

City SAINT PETERSBURG State FL Zip Code 33706

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C

Transaction ID : **B853CF490F**

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 126.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEVIN, STEPHEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12274 1ST ST. W.
2

City SAINT PETERSBURG State FL Zip Code 33706

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C

Transaction ID : B05C683F16I

Amount of Each Disbursement this Period: 50.00

Memo Item

B. LEWIS, DENISE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 366 BACKBONE RD

City CLINTON State PA Zip Code 15026

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB6CAAF119

Amount of Each Disbursement this Period: 25.00

Memo Item

C. LEWIS, DENISE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 366 BACKBONE RD

City CLINTON State PA Zip Code 15026

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B633D2F807.

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LEWIS, GEORGE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 37939 S. BOULDER RIDGE DR.

City TUCSON State AZ Zip Code 85739

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BBCCA5FD0**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. LEWIS, GEORGE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 37939 S. BOULDER RIDGE DR.

City TUCSON State AZ Zip Code 85739

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B69B30C86B**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. LEWIS, GEORGE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 37939 S. BOULDER RIDGE DR.

City TUCSON State AZ Zip Code 85739

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B3739FC6CF**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LIFGREN, CHARLES, G, ,

Full Name (Last, First, Middle Initial)

Mailing Address 104 ASH DRIVE

City BOLINGBROOK State IL Zip Code 60490

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B7B16199E01

Amount of Each Disbursement this Period: 100.00

Memo Item

B. LIFGREN, CHARLES, G, ,

Full Name (Last, First, Middle Initial)

Mailing Address 104 ASH DRIVE

City BOLINGBROOK State IL Zip Code 60490

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B3925317328

Amount of Each Disbursement this Period: 100.00

Memo Item

C. LIGON, KENNY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 139 HOPKINS STREET

City KILGORE State TX Zip Code 75662

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 22 / 2021

FEC Identification Number: C

Transaction ID : B393867095

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 205.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LIPHAM, MARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 114

City SMITHVILLE State GA Zip Code 31787

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BD133FBE89**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. LIPHAM, MARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 114

City SMITHVILLE State GA Zip Code 31787

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B9DDA5288B**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. LIPHAM, MARLENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 114

City SMITHVILLE State GA Zip Code 31787

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B81699DB25**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LIPHAM, MARLENE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address PO BOX 114		FEC Identification Number C [REDACTED] Transaction ID : B90FF804893	
City SMITHVILLE	State GA	Zip Code 31787	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. LITCHFIELD, JUDY, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7932 KING ARTHURS COURT		FEC Identification Number C [REDACTED] Transaction ID : B08108F7E7F	
City DENVER	State NC	Zip Code 28037	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. LOBELLO, JOHN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 23 BECKER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B7C6E33F2E	
City SPRINGFIELD	State NJ	Zip Code 07081	Amount of Each Disbursement this Period 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LOCHBIHLER, JOAN, , ,		Date of Disbursement MM / DD / YYYY 01 / 07 / 2021	
Mailing Address 289 BUG BILL ROAD		FEC Identification Number C [REDACTED] Transaction ID : B4DF1E8E8A Amount of Each Disbursement this Period 50.00	
City BON AQUA	State TN	Zip Code 37025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. LOCKMAN, HELENE, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 23057 FARMINGTON		FEC Identification Number C [REDACTED] Transaction ID : BF4F08AB1F: Amount of Each Disbursement this Period 35.00	
City FARMINGTON	State MI	Zip Code 48336-3920	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. LOCKMAN, HELENE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 23057 FARMINGTON		FEC Identification Number C [REDACTED] Transaction ID : B8606722B7I Amount of Each Disbursement this Period 35.00	
City FARMINGTON	State MI	Zip Code 48336-3920	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b through 30b with checkboxes. Line 28a is checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: LOMBARDI, IRENE. Includes fields for full name, mailing address (6 BRIAN CT, STAFFORD VA 22556), purpose (CONTRIBUTION REFUND), and amount (100.00).

Form B: LONBECK, PHILIP. Includes fields for full name, mailing address (23518 GRAND RIM CT, DIAMOND BAR CA 91765), purpose (CONTRIBUTION REFUND), and amount (35.00).

Form C: LONBECK, PHILIP. Includes fields for full name, mailing address (23518 GRAND RIM CT, DIAMOND BAR CA 91765), purpose (CONTRIBUTION REFUND), and amount (35.00).

SUBTOTAL of Disbursements This Page (optional) 170.00
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LONBECK, PHILIP, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23518 GRAND RIM CT

City DIAMOND BAR State CA Zip Code 91765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B949901F1A1

Amount of Each Disbursement this Period: 35.00

Memo Item

B. LONG, JERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15690, DURANGO DR

City CHUNCHULA State AL Zip Code 36521

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BA7EB1A884

Amount of Each Disbursement this Period: 50.00

Memo Item

C. LONG, JERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15690, DURANGO DR

City CHUNCHULA State AL Zip Code 36521

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BE0F746A28

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LONG, JERRY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 15690, DURANGO DR		FEC Identification Number C [REDACTED] Transaction ID : BA830ADA81
City CHUNCHULA	State AL	Zip Code 36521
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. LONG, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 03 / 17 / 2021
Mailing Address 2600 PANORAMA DR. STE303		FEC Identification Number C [REDACTED] Transaction ID : B3F03ACE52I
City SIGNAL HILL	State CA	Zip Code 90755
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. LONG, SANDRA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 322 NORTH BROOKE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B17F60DFFC
City CANTON	State GA	Zip Code 30115
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOPER, TIMOTHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3719 PLEASANT AVE.

City PORTSMOUTH State OH Zip Code 45662

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B10E392B49f

Amount of Each Disbursement this Period: 35.00

Memo Item

B. LOPER, TIMOTHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3719 PLEASANT AVE.

City PORTSMOUTH State OH Zip Code 45662

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B90035AB01f

Amount of Each Disbursement this Period: 35.00

Memo Item

C. LOPEZ, AMELITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 515 BERGEN ST

City HARRISON State NJ Zip Code 07029

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE658064E3

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LORIE, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8619 CRESCENT SPUR DR.

City RICHMOND State TX Zip Code 77406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : B031CC1E26

Amount of Each Disbursement this Period: 35.00

Memo Item

B. LORIE, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8619 CRESCENT SPUR DR.

City RICHMOND State TX Zip Code 77406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : BB3659566D7

Amount of Each Disbursement this Period: 35.00

Memo Item

C. LORIE, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8619 CRESCENT SPUR DR.

City RICHMOND State TX Zip Code 77406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : B9A2B57F95

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LORX, KITTY, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021		
Mailing Address 13135 GALLOWAY GARDEN			FEC Identification Number C [REDACTED] Transaction ID : B25D9F3FC9 Amount of Each Disbursement this Period [REDACTED] 35.00		
City WALKER	State LA	Zip Code 70785	Category/Type 010		
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____ District: _____		<input type="checkbox"/> Memo Item			
Full Name (Last, First, Middle Initial) B. LORX, KITTY, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021		
Mailing Address 13135 GALLOWAY GARDEN			FEC Identification Number C [REDACTED] Transaction ID : B4502F6C066 Amount of Each Disbursement this Period [REDACTED] 35.00		
City WALKER	State LA	Zip Code 70785	Category/Type 010		
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____ District: _____		<input type="checkbox"/> Memo Item			
Full Name (Last, First, Middle Initial) C. LORX, KITTY, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021		
Mailing Address 13135 GALLOWAY GARDEN			FEC Identification Number C [REDACTED] Transaction ID : B88A9904D8 Amount of Each Disbursement this Period [REDACTED] 35.00		
City WALKER	State LA	Zip Code 70785	Category/Type 010		
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____ District: _____		<input type="checkbox"/> Memo Item			
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 105.00		
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LOSEY, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3205 MONETTE LANE

City PLANO State TX Zip Code 75025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B0A2D8F3AF

Amount of Each Disbursement this Period: 25.00

Memo Item

B. LOSEY, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3205 MONETTE LANE

City PLANO State TX Zip Code 75025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B3DA2E2B8C

Amount of Each Disbursement this Period: 25.00

Memo Item

C. LOSEY, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3205 MONETTE LANE

City PLANO State TX Zip Code 75025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA66F8E232

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. LOUDENSLAGER, DEBORAH, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 4010 WENONAH LN		FEC Identification Number C [REDACTED] Transaction ID : BD0F1DD5F3 Amount of Each Disbursement this Period 50.00	
City FORT WAYNE	State IN	Zip Code 46809	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. LOUDENSLAGER, DEBORAH, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 4010 WENONAH LN		FEC Identification Number C [REDACTED] Transaction ID : BAF676EC1A Amount of Each Disbursement this Period 50.00	
City FORT WAYNE	State IN	Zip Code 46809	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. LOUDENSLAGER, DEBORAH, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 4010 WENONAH LN		FEC Identification Number C [REDACTED] Transaction ID : B2A7CBA01! Amount of Each Disbursement this Period 50.00	
City FORT WAYNE	State IN	Zip Code 46809	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUCHINI-LUCERO, DORA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4322 KINGSTON CT

City LAS CRUCES State NM Zip Code 88012

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BA33238CC4

Amount of Each Disbursement this Period: 10.00

Memo Item

B. LUERA, JANET, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 537 JUNIPER DR

City NAPERVILLE State IL Zip Code 60540

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BC6FC57927

Amount of Each Disbursement this Period: 100.00

Memo Item

C. LUERA, JANET, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 537 JUNIPER DR

City NAPERVILLE State IL Zip Code 60540

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BCE37A1177

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 210.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUGAR, MARTIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 34397 HILL CT

City WARREN State OR Zip Code 97053

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : **BCCCB07733**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. LUND, GLORIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3004 W SPRUCELEIGH CT

City SIOUX FALLS State SD Zip Code 57105

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B9FA124492**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. LUPPI, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 124 POR LA MAR CIRCLE

City SANTA BARBARA State CA Zip Code 93103

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2021

FEC Identification Number: C

Transaction ID : **B663725BED**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. LUTZ, CARLIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4627 SHILOH RIDGE TRL

City SNELLVILLE State GA Zip Code 30039

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BAB00056111

Amount of Each Disbursement this Period: 25.00

Memo Item

B. LUTZ, CARLIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4627 SHILOH RIDGE TRL

City SNELLVILLE State GA Zip Code 30039

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B38BEF9985I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. LUTZ, CARLIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4627 SHILOH RIDGE TRL

City SNELLVILLE State GA Zip Code 30039

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BBDF130D4c

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: LUTZ, CARLIN, , ,. Includes fields for Mailing Address (4627 SHILOH RIDGE TRL), City (SNELLVILLE, GA), Zip Code (30039), Purpose of Disbursement (CONTRIBUTION REFUND), and Disbursement Amount (25.00).

Form B: LUU, HAU, , ,. Includes fields for Mailing Address (PO BOX 42186), City (HOUSTON, TX), Zip Code (77242), Purpose of Disbursement (CONTRIBUTION REFUND), and Disbursement Amount (500.00).

Form C: MACIAS, ROSE, , ,. Includes fields for Mailing Address (2617 TILLER AVENUE), City (PORT HUENEME, CA), Zip Code (93041), Purpose of Disbursement (CONTRIBUTION REFUND), and Disbursement Amount (50.00).

SUBTOTAL of Disbursements This Page (optional) 575.00
TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MACKEY, ERNEST, , MR,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 190 RED GATE FARM TRL			
City SAVANNAH	State GA	Zip Code 31405	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : BB2BADCAC Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MACKEY, ERNEST, , MR,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 190 RED GATE FARM TRL			
City SAVANNAH	State GA	Zip Code 31405	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : B772C696BF Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MACKEY, ERNEST, , MR,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 190 RED GATE FARM TRL			
City SAVANNAH	State GA	Zip Code 31405	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : BE51D0DB2 Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MACKEY, ERNEST, , MR,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 190 RED GATE FARM TRL			
City SAVANNAH	State GA	Zip Code 31405	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type	FEC Identification Number C [REDACTED] Transaction ID : BE6EAA9F51 Amount of Each Disbursement this Period 50.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. MACNEILL, JOHN, , ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 6215 LOGAN CREEK LANE			
City SUGAR LAND	State TX	Zip Code 77479	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type	FEC Identification Number C [REDACTED] Transaction ID : B2BC8A5D1E Amount of Each Disbursement this Period 25.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. MACRI, MIKE, , ,		Date of Disbursement MM / DD / YYYY 03 / 23 / 2021	
Mailing Address 14291 LAKEVIEW DR			
City CLIVE	State IA	Zip Code 50325	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type	FEC Identification Number C [REDACTED] Transaction ID : BAF5C688E0 Amount of Each Disbursement this Period 50.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MACRI, MIKE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14291 LAKEVIEW DR

City CLIVE State IA Zip Code 50325

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 23 / 2021

FEC Identification Number: C

Transaction ID : B291B48EBD

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MADAR, WENDOLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1505 CHERRY LANE

City COLLEYVILLE State TX Zip Code 76034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : B034BAF893

Amount of Each Disbursement this Period: 50.00

Memo Item

C. MADDALENA, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 21649 ROBERTSON BLVD

City CHOWCHILLA State CA Zip Code 93610

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BB549748B7

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MADDALENA, SHARON, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 21649 ROBERTSON BLVD		FEC Identification Number C [REDACTED] Transaction ID : BA40CD9478 Amount of Each Disbursement this Period [REDACTED] 35.00
City CHOWCHILLA	State CA	Zip Code 93610
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MADDOCK, MARILYN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 3251 MATLOCK RD 2106		FEC Identification Number C [REDACTED] Transaction ID : BAA5161E9C Amount of Each Disbursement this Period [REDACTED] 25.00
City MANSFIELD	State TX	Zip Code 76063
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MADRIGAL, RENATO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address P.O. BOX 2801		FEC Identification Number C [REDACTED] Transaction ID : B32949709D Amount of Each Disbursement this Period [REDACTED] 25.00
City DUBLIN	State CA	Zip Code 94568
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 85.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAGEE, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 289

City COLRAIN State MA Zip Code 01340

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B67E6690233

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MAGOWAN, DEBORAH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2100 WASHINGTON STREET

City SAN FRANCISCO State CA Zip Code 94109

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2021

FEC Identification Number: C

Transaction ID : B4E42814309

Amount of Each Disbursement this Period: 12000.00

Memo Item

C. MAJOR, MARC, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 574 WESTON RD

City MANCHESTER State NH Zip Code 03103

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BF1A492698

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12085.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MALLATT, HELEN F., , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 802. CANNA. ST.		FEC Identification Number C [REDACTED] Transaction ID : B408C8EEAE Amount of Each Disbursement this Period [REDACTED] 35.00	
City CHANNELVIEW	State TX	Zip Code 77530	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MALLATT, HELEN F., , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 802. CANNA. ST.		FEC Identification Number C [REDACTED] Transaction ID : BF65A3184B Amount of Each Disbursement this Period [REDACTED] 35.00	
City CHANNELVIEW	State TX	Zip Code 77530	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MALONE, DON, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 60 FAIRWAY LANE		FEC Identification Number C [REDACTED] Transaction ID : BFB56A47C Amount of Each Disbursement this Period [REDACTED] 25.00	
City LITTLETON	State CO	Zip Code 80123	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 95.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MANN, EBEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16445 SPRING VALLEY RD

City DADE CITY State FL Zip Code 33523

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC06D7B932

Amount of Each Disbursement this Period: 10.00

Memo Item

B. MANSFIELD, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 522 SO 300 E

City BRIGHAM CITY State UT Zip Code 84302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B77CFAF5E8

Amount of Each Disbursement this Period: 10.00

Memo Item

C. MARES, RAY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 119 OLD SQUAW RD.

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B40C2992D9

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

35.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARES, RAY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 119 OLD SQUAW RD.

City MOORESVILLE State NC Zip Code 28117

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B7BF9D5270**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. MARR, NED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 301 AVOCADO ST.
14

City COSTA MESA State CA Zip Code 92627

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BB80FEFA91**

Amount of Each Disbursement this Period: 5.00

Memo Item

C. MARRONE, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4006 WESTERDALE DR

City FULSHEAR State TX Zip Code 77441

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BD4215D323**

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MARRONE, EVA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 4006 WESTERDALE DR			
City FULSHEAR	State TX	Zip Code 77441	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : B550E136E5 Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MARSH, TOM, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 1290			
City PIGEON FORGE	State TN	Zip Code 37868	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : B9F6B119112 Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MARSH, TOM, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 1290			
City PIGEON FORGE	State TN	Zip Code 37868	
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : B1C9A85185 Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARSH, TOM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1290

City PIGEON FORGE State TN Zip Code 37868

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC909E288E

Amount of Each Disbursement this Period: 200.00

Memo Item

B. MARTIN, GLEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 405 W FANNIN

City REFUGIO State TX Zip Code 78377

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B01814B8929

Amount of Each Disbursement this Period: 50.00

Memo Item

C. MARTIN, GLEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 405 W FANNIN

City REFUGIO State TX Zip Code 78377

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B84EA91FF1

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, JEANIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4618 93RD ST

City LUBBOCK State TX Zip Code 79424

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : **BD333A6E48**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MARTIN, JEANIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4618 93RD ST

City LUBBOCK State TX Zip Code 79424

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : **B10CC4DBAC**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. MARTIN, JEANIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4618 93RD ST

City LUBBOCK State TX Zip Code 79424

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2021

FEC Identification Number: C

Transaction ID : **BEAE06E0B**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, JEANIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4618 93RD ST

City LUBBOCK State TX Zip Code 79424

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B7231650D5C

Amount of Each Disbursement this Period: 25.00

Memo Item

B. MARTIN, KROLL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16433 FORREST DR

City HOUSTON State MO Zip Code 65483

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BAACA6DDFI

Amount of Each Disbursement this Period: 35.00

Memo Item

C. MARTIN, MARILYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1173 S.E. CAMBRIDGE DRIVE

City PORT SAINT LUCIE State FL Zip Code 34952

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B796F7BD99

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTIN, MARILYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1173 S.E. CAMBRIDGE DRIVE

City PORT SAINT LUCIE State FL Zip Code 34952

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B4FF8DFEFE

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MARTINO, VICKIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2200 LATHAM ST

City BAKERSFIELD State CA Zip Code 93306

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : B16A4A94B0!

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MARTNEZ, ALVARO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15948 NW 82ND PLACE

City HIALEAH State FL Zip Code 33016

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B410FD6B3F

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MARTNEZ, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9427 SOUTH BROADWAY
4

City LOS ANGELES State CA Zip Code 90003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C
Transaction ID : BDDB9EF23E
Amount of Each Disbursement this Period: 25.00

Memo Item

B. MARTNEZ, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9427 SOUTH BROADWAY
4

City LOS ANGELES State CA Zip Code 90003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C
Transaction ID : B45CB4ABD8
Amount of Each Disbursement this Period: 25.00

Memo Item

C. MASCARI, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 285 GRANDE WAY
1204

City NAPLES State FL Zip Code 34110

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C
Transaction ID : B7C0792AC6
Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

21b 22 23 26 27
28a 28b 28c 29 30b
[X] 28a

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASCARI, MICHAEL, , ,
Date of Disbursement: 06 / 04 / 2021
Mailing Address: 285 GRANDE WAY 1204
City: NAPLES, State: FL, Zip Code: 34110
Purpose of Disbursement: CONTRIBUTION REFUND
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
Category/Type: 010
FEC Identification Number: C
Transaction ID: BAB6A98718
Amount of Each Disbursement this Period: 35.00
Memo Item: []

B. MASCARI, MICHAEL, , ,
Date of Disbursement: 06 / 04 / 2021
Mailing Address: 285 GRANDE WAY 1204
City: NAPLES, State: FL, Zip Code: 34110
Purpose of Disbursement: CONTRIBUTION REFUND
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
Category/Type: 010
FEC Identification Number: C
Transaction ID: B21C81DFC3
Amount of Each Disbursement this Period: 35.00
Memo Item: []

C. MASCARI, MICHAEL, , ,
Date of Disbursement: 06 / 04 / 2021
Mailing Address: 285 GRANDE WAY 1204
City: NAPLES, State: FL, Zip Code: 34110
Purpose of Disbursement: CONTRIBUTION REFUND
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
Category/Type: 010
FEC Identification Number: C
Transaction ID: BA95FEB801
Amount of Each Disbursement this Period: 35.00
Memo Item: []

SUBTOTAL of Disbursements This Page (optional)..... 105.00
TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASCARI, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 285 GRANDE WAY
1204

City NAPLES State FL Zip Code 34110

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B1C082FA90

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MASCARI, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 285 GRANDE WAY
1204

City NAPLES State FL Zip Code 34110

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B708CC109F

Amount of Each Disbursement this Period: 35.00

Memo Item

C. MASON, BOBBY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17514 CHASEFIELD AVE

City BATON ROUGE State LA Zip Code 70817

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B0E3CDA3E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASON, BOBBY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17514 CHASEFIELD AVE

City BATON ROUGE State LA Zip Code 70817

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B5E2EC3FC6

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MASON, JUANITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 414 WATER ST 2402

City BALTIMORE State MD Zip Code 21202

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B8F7E166063

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MASSA, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 428 CHOCTAW DR.

City ABITA SPRINGS State LA Zip Code 70420

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BA1D4D375T

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MASSEY, MACK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 124 LARKSPUR LOOP

City ALTO State NM Zip Code 88312

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B0DA01E386

Amount of Each Disbursement this Period: 100.00

Memo Item

B. MASSON, DIANE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 222179

City CARMEL State CA Zip Code 93922

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BAA93D9592

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. MATHEWS, TERI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 388 PALOMARES AVE.

City VENTURA State CA Zip Code 93003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B97D0B9EB1

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MATUNIS, FRANCIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 324 AUTUMN CHASE

City HARRISBURG State PA Zip Code 17110

Purpose of Disbursement CONTRIBUTION REFUND Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : B4B2824027f
Amount of Each Disbursement this Period: 100.00

Memo Item

B. MAULA, RALPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 622 SE DEAN TER

City PORT SAINT LUCIE State FL Zip Code 34984

Purpose of Disbursement CONTRIBUTION REFUND Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C
Transaction ID : B507BFA2E9f
Amount of Each Disbursement this Period: 35.00

Memo Item

C. MAULA, RALPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 622 SE DEAN TER

City PORT SAINT LUCIE State FL Zip Code 34984

Purpose of Disbursement CONTRIBUTION REFUND Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : BBD9EC366f
Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 170.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MAYO, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1003 WALLIN FARMS CV

City HUTTO State TX Zip Code 78634

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC3C2BEE7/

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MC DANIEL, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3110 MEYERLOA LOA

City PASADENA State CA Zip Code 91107

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B1358A399F4

Amount of Each Disbursement this Period: 10.00

Memo Item

C. MCCABE, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 205 CLUB DR.

City NOVATO State CA Zip Code 94945

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B3D43BE084

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCCARTHY, EMMA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 60 VIA CASITAS

City BONSALL State CA Zip Code 92003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B02EE1216B

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MCCARTHY, EMMA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 60 VIA CASITAS

City BONSALL State CA Zip Code 92003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : BB43F6DA94

Amount of Each Disbursement this Period: 35.00

Memo Item

C. MCCASLIN, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 147 GREENVIEW DR

City WINTER HAVEN State FL Zip Code 33881

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BADCCBDB

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MCCASLIN, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 147 GREENVIEW DR			
City WINTER HAVEN	State FL	Zip Code 33881	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	FEC Identification Number C [REDACTED] Transaction ID : BCE94C1448 Amount of Each Disbursement this Period [REDACTED] 50.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. MCCAULLEY, DAVID, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 54523 WHITE SPRUCE. LN			
City SHELBY TWP	State MI	Zip Code 48513	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	FEC Identification Number C [REDACTED] Transaction ID : B5DA324151 Amount of Each Disbursement this Period [REDACTED] 50.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. MCCAULLEY, DAVID, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 54523 WHITE SPRUCE. LN			
City SHELBY TWP	State MI	Zip Code 48513	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	FEC Identification Number C [REDACTED] Transaction ID : B58DFB64E9 Amount of Each Disbursement this Period [REDACTED] 50.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 150.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MCCAULLEY, DAVID, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 54523 WHITE SPRUCE. LN		FEC Identification Number C [REDACTED] Transaction ID : B428B644CF Amount of Each Disbursement this Period 50.00	
City SHELBY TWP	State MI	Zip Code 48513	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MCCAULLEY, DAVID, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 54523 WHITE SPRUCE. LN		FEC Identification Number C [REDACTED] Transaction ID : BDE65A0DC# Amount of Each Disbursement this Period 50.00	
City SHELBY TWP	State MI	Zip Code 48513	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MCCLURE, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 850 FOXWORTH BOULEVARD APT 203		FEC Identification Number C [REDACTED] Transaction ID : B930B77C93 Amount of Each Disbursement this Period 250.00	
City LOMBARD	State IL	Zip Code 60148	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MCCOLGAN, MARY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address P.O. BOX 640		FEC Identification Number C [REDACTED] Transaction ID : B010379D97C Amount of Each Disbursement this Period 50.00	
City BOKEELIA	State FL	Zip Code 33922	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MCCOLGAN, MARY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address P.O. BOX 640		FEC Identification Number C [REDACTED] Transaction ID : BF852526CA/ Amount of Each Disbursement this Period 50.00	
City BOKEELIA	State FL	Zip Code 33922	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MCCOLGAN, MARY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address P.O. BOX 640		FEC Identification Number C [REDACTED] Transaction ID : B128E57ADE Amount of Each Disbursement this Period 50.00	
City BOKEELIA	State FL	Zip Code 33922	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MCDONALD, BARBARA, , ,		Date of Disbursement MM / DD / YYYY 02 / 08 / 2021
Mailing Address 1809 HAWTHORNE DR		FEC Identification Number C [REDACTED] Transaction ID : B9741E2E91f Amount of Each Disbursement this Period [REDACTED] 250.00
City RICHOMD	State TX	Zip Code 77469
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MCDONALD, LEONARD, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 201 PERSHING AVE. NW		FEC Identification Number C [REDACTED] Transaction ID : B1A1A100B3f Amount of Each Disbursement this Period [REDACTED] 100.00
City LEESBURG	State VA	Zip Code 20176
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MCGLONE, GINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 33 MIDDLE BRANCH ROAD		FEC Identification Number C [REDACTED] Transaction ID : B81FDD0460f Amount of Each Disbursement this Period [REDACTED] 50.00
City MAHOPAC	State NY	Zip Code 10541
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 400.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MCGLONE, GINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 33 MIDDLE BRANCH ROAD		FEC Identification Number C [REDACTED] Transaction ID : B292C3777E! Amount of Each Disbursement this Period 50.00
City MAHOPAC	State NY	Zip Code 10541
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MCGLONE, GINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 33 MIDDLE BRANCH ROAD		FEC Identification Number C [REDACTED] Transaction ID : BA94686C464 Amount of Each Disbursement this Period 50.00
City MAHOPAC	State NY	Zip Code 10541
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. MCGLONE, GINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 33 MIDDLE BRANCH ROAD		FEC Identification Number C [REDACTED] Transaction ID : B0C51E728F Amount of Each Disbursement this Period 50.00
City MAHOPAC	State NY	Zip Code 10541
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCGRATH, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 95

City OLDSMAR State FL Zip Code 33624

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B70FF0FC03

Amount of Each Disbursement this Period: 15.00

Memo Item

B. MCKENNA, DEBRA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 723 MARBURY LANE

City LONGBOAT KEY State FL Zip Code 34228

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : B0A77A2478/

Amount of Each Disbursement this Period: 15.00

Memo Item

C. MCKENNA, DEBRA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 723 MARBURY LANE

City LONGBOAT KEY State FL Zip Code 34228

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : B64D85F8FE

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCKINNEY, BRIAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 49 RHINELAND PK

City DELPHI State IN Zip Code 46923

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B3A29EC8E4

Amount of Each Disbursement this Period: 25.00

Memo Item

B. MCKINNEY, BRIAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 49 RHINELAND PK

City DELPHI State IN Zip Code 46923

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B815FD68D8/

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MCLANE, H ARTHUR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 505

City VALDOSTA State GA Zip Code 31603

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE1874D525

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCLAURIN, STEVE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4817 JOHNSON POND ROAD

City APEX State NC Zip Code 27539

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BF5946E6664

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MCLELLAN, DAVE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8611 TIPSICO LK RD

City HOLLY State MI Zip Code 48442

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B71FA90E15f

Amount of Each Disbursement this Period: 35.00

Memo Item

C. MCMANUS, DARREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address BOX 52587

City RIVERSIDE State CA Zip Code 92517

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B16AD0CAC

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MCMURRAY, CLAIRE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2715 ASPEN CIR

City NORMAN State OK Zip Code 73072

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2021

FEC Identification Number: C

Transaction ID : B0658090CE!

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MCNEEL, EMMETT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1466 S 8TH AVE

City YUMA State AZ Zip Code 85364

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B088F221319

Amount of Each Disbursement this Period: 50.00

Memo Item

C. MCNEEL, EMMETT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1466 S 8TH AVE

City YUMA State AZ Zip Code 85364

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BBEB15C55!

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MCNEEL, EMMETT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1466 S 8TH AVE		FEC Identification Number C [REDACTED] Transaction ID : BD7FF5E1ED Amount of Each Disbursement this Period 50.00	
City YUMA	State AZ	Zip Code 85364	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. MCNEEL, EMMETT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1466 S 8TH AVE		FEC Identification Number C [REDACTED] Transaction ID : BA65F40CA3 Amount of Each Disbursement this Period 50.00	
City YUMA	State AZ	Zip Code 85364	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. MCNOSKY, ANTHONY, , ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 5108 PLEASANT RUN RD		FEC Identification Number C [REDACTED] Transaction ID : B286DD0BD Amount of Each Disbursement this Period 25.00	
City COLLEYVILLE	State TX	Zip Code 76034	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MCQUAID, DARLENE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 603 W. MAIN ST.		FEC Identification Number C [REDACTED] Transaction ID : B202D0CDE7 Amount of Each Disbursement this Period [REDACTED] 35.00	
City ROBINSON	State IL	Zip Code 62454	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MCWILLIAMS, OLIVER, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 7502 WANING STAR COURT		FEC Identification Number C [REDACTED] Transaction ID : B4BBEDDD5I Amount of Each Disbursement this Period [REDACTED] 35.00	
City SPRING	State TX	Zip Code 77379	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B40FDB726F Amount of Each Disbursement this Period [REDACTED] 50.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 120.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : BD8076D04B Amount of Each Disbursement this Period [REDACTED] 25.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B730152D7E/ Amount of Each Disbursement this Period [REDACTED] 50.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : BDCB52D52! Amount of Each Disbursement this Period [REDACTED] 50.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 125.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B77BC526AE Amount of Each Disbursement this Period [REDACTED] 25.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : BCFB7D6228 Amount of Each Disbursement this Period [REDACTED] 35.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B57F9E20B7 Amount of Each Disbursement this Period [REDACTED] 50.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 110.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B92A00F61D Amount of Each Disbursement this Period 75.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : BA42C511FA Amount of Each Disbursement this Period 35.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B424382B50 Amount of Each Disbursement this Period 75.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6312C75B3

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B18F21A245#

Amount of Each Disbursement this Period: 50.00

Memo Item

C. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA8AA080E

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B22F93D42C

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BB96EC8FFB

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B0ED40278D

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B6802551808 Amount of Each Disbursement this Period 50.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : BAD1C02525I Amount of Each Disbursement this Period 35.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B52FB78F74 Amount of Each Disbursement this Period 35.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED]	
City EDWARDSVILLE	State IL	Zip Code 62025	Transaction ID : B00AD3BAB
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 75.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED]	
City EDWARDSVILLE	State IL	Zip Code 62025	Transaction ID : B5DBF37C8A
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED]	
City EDWARDSVILLE	State IL	Zip Code 62025	Transaction ID : B935282128E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : BB1FFEE1B/ Amount of Each Disbursement this Period [REDACTED] 35.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : B6516F146D9 Amount of Each Disbursement this Period [REDACTED] 50.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MEFFORD, DEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address PO BOX 672		FEC Identification Number C [REDACTED] Transaction ID : BBF3BD9A0I Amount of Each Disbursement this Period [REDACTED] 25.00	
City EDWARDSVILLE	State IL	Zip Code 62025	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 110.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE005FB33F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B814A9812A

Amount of Each Disbursement this Period: 75.00

Memo Item

C. MEFFORD, DEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 672

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1B53E4DA

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEINARDUS, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 56-842 KAMALEI PL BOX 10

City HAWI State HI Zip Code 96743

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6A919D442!

Amount of Each Disbursement this Period: 250.00

Memo Item

B. MELCHIONNA, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 28531 CALABRIA CT. 201

City NAPLES State FL Zip Code 34110

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B8E92DAC37

Amount of Each Disbursement this Period: 50.00

Memo Item

C. MERIWETHER, WANITTA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 538

City MAGDALENA State NM Zip Code 87825

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B1E3048C30

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 335.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEYER, ELAINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24 PASEO VILLAGE

City CLOVIS State NM Zip Code 88101

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B50E8663DC

Amount of Each Disbursement this Period: 25.00

Memo Item

B. MEYER, ELAINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24 PASEO VILLAGE

City CLOVIS State NM Zip Code 88101

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B91E919F6A

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MEYER, ELAINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 24 PASEO VILLAGE

City CLOVIS State NM Zip Code 88101

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BFC7A20206

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MEYERS, JUDE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9333 MARSDEN ST

City PHILADELPHIA State PA Zip Code 19114

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BBEF2150D2

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MICI, ARDIAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1 WINDSOR WOODS LANE 1216

City CANTON State MA Zip Code 02021

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : BF96FD221E

Amount of Each Disbursement this Period: 5.00

Memo Item

C. MIKELL, RUTH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 102 PARTRIDGE RIDGE

City WOODSTOCK State GA Zip Code 30188

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B1DDC6A69

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MIKELL, RUTH, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 102 PARTRIDGE RIDGE		FEC Identification Number C [REDACTED] Transaction ID : B4B9DBBA11 Amount of Each Disbursement this Period 25.00
City WOODSTOCK	State GA	Zip Code 30188
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. MILLESS, DARLENE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 2065 315TH AVE.		FEC Identification Number C [REDACTED] Transaction ID : B0CB6B67EC Amount of Each Disbursement this Period 50.00
City ISLE	State MN	Zip Code 56342
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. MILLS, ANNA, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 9470 N. CITRUS AVE		FEC Identification Number C [REDACTED] Transaction ID : B441A284F1 Amount of Each Disbursement this Period 35.00
City CRYSTAL RIVER	State FL	Zip Code 34428
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶	110.00
TOTAL This Period (last page this line number only)..... ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MINUTILLO, JOHN, C, ,

Full Name (Last, First, Middle Initial)

Mailing Address 216 DELAND AVE

City INDIALANTIC State FL Zip Code 32903

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 17 / 2021

FEC Identification Number: C

Transaction ID : B9ACF38FBE

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MINYARD, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2913 JOANNA DR

City CONWAY State AR Zip Code 72034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BAFD57A1A6

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MINYARD, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2913 JOANNA DR

City CONWAY State AR Zip Code 72034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BBD2D1B06:

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MINYARD, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2913 JOANNA DR

City CONWAY State AR Zip Code 72034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B0E6EC75E3

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MINYARD, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2913 JOANNA DR

City CONWAY State AR Zip Code 72034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BD7C8E15DF

Amount of Each Disbursement this Period: 35.00

Memo Item

C. MITCHELL, BILL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1634 WEST FIELD AVE

City BALLWIN State MO Zip Code 63011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B7660B493F

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MITCHELL, CHAD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1935 S PARLEYS LP

City KAMAS State UT Zip Code 84036

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BF77700844F**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MITCHELL, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7259 TENBY WAY

City CASTLE ROCK State CO Zip Code 80108

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : **B9B8660A9D1**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. MITCHELL, EVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7259 TENBY WAY

City CASTLE ROCK State CO Zip Code 80108

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : **B28F830A30**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOFFAT, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13731 CHRISTINA LANE

City BELLEVILLE State MI Zip Code 48111

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BF532F0DA9

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MOLINA, J. ERNESTO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4110 RANCHVIEW LANE NORTH

City MINNEAPOLIS State MN Zip Code 55446

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : BE56BD8D16

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MONTALVO, EVELYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1906 WILDWOOD LANE

City RICHMOND State TX Zip Code 77406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B6A78F2C54

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MONTALVO, EVELYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1906 WILDWOOD LANE

City RICHMOND State TX Zip Code 77406

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC4BC9AFF/

Amount of Each Disbursement this Period: 35.00

Memo Item

B. MONTANA, FRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8401 TOWNSEND DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B54D4996CC/

Amount of Each Disbursement this Period: 50.00

Memo Item

C. MONTANA, FRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8401 TOWNSEND DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B7A5B6A742/

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MONTANA, FRED, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 8401 TOWNSEND DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B8310F22F48 Amount of Each Disbursement this Period 50.00	
City EDEN PRAIRIE	State MN	Zip Code 55344	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MONTANA, FRED, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 8401 TOWNSEND DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BC790C015E Amount of Each Disbursement this Period 50.00	
City EDEN PRAIRIE	State MN	Zip Code 55344	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MONZO, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1715 CENTRAL AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BA395236BC Amount of Each Disbursement this Period 50.00	
City SHIP BOTTOM	State NJ	Zip Code 08008	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOOMEY, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5162 JUNIPER LOOP 1924

City PINE State AZ Zip Code 85544

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2021

FEC Identification Number: C

Transaction ID : B88C08D6C9

Amount of Each Disbursement this Period: 25.00

Memo Item

B. MOOMEY, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5162 JUNIPER LOOP 1924

City PINE State AZ Zip Code 85544

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2021

FEC Identification Number: C

Transaction ID : B583E24CEE!

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MOOMEY, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5162 JUNIPER LOOP 1924

City PINE State AZ Zip Code 85544

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2021

FEC Identification Number: C

Transaction ID : B6E840F0C4

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOORE, LAURALEE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 355 SUGAR CREEK RD

City BLAIRSVILLE State GA Zip Code 30512

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B956D02563f

Amount of Each Disbursement this Period: 10.00

Memo Item

B. MOORE, NELDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 SUMMER TRACE BLVD.

City LAUREL State MS Zip Code 39440

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B99F875D30L

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MOORE, NELDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 SUMMER TRACE BLVD.

City LAUREL State MS Zip Code 39440

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B303B417F7

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MOORE, NELDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 SUMMER TRACE BLVD.

City LAUREL State MS Zip Code 39440

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B8AB8AF9E8

Amount of Each Disbursement this Period: 25.00

Memo Item

B. MOORE, NELDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 SUMMER TRACE BLVD.

City LAUREL State MS Zip Code 39440

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B369A9CA26I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. MORETON, MISTY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11333 POSTHILL RD

City LAKESIDE State CA Zip Code 92040

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 26 / 2021

FEC Identification Number: C

Transaction ID : BFEDF8B4C

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORETON, MISTY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11333 POSTHILL RD

City LAKESIDE State CA Zip Code 92040

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C

Transaction ID : B5AB3EBA9

Amount of Each Disbursement this Period: 10.00

Memo Item

B. MORRIS-PHILLIPS, ANITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6003 VALENCIA AVENUE

City SATSUMA State AL Zip Code 36572

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BAF12374B9I

Amount of Each Disbursement this Period: 10.00

Memo Item

C. MORRIS-PHILLIPS, ANITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6003 VALENCIA AVENUE

City SATSUMA State AL Zip Code 36572

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B1742F6090I

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 30.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MORRIS-PHILLIPS, ANITA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 6003 VALENCIA AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B34DEF3BA2
City SATSUMA	State AL	Zip Code 36572
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 10.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MORRIS-PHILLIPS, ANITA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 6003 VALENCIA AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BA242B253E
City SATSUMA	State AL	Zip Code 36572
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 10.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MORTON, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 1424 KESWICK DR		FEC Identification Number C [REDACTED] Transaction ID : B1BC2EDA7
City FAYETTEVILLE	State NC	Zip Code 28304
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 5.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MORTON, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1424 KESWICK DR

City FAYETTEVILLE State NC Zip Code 28304

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B93C464974C

Amount of Each Disbursement this Period: 5.00

Memo Item

B. MORTON, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1424 KESWICK DR

City FAYETTEVILLE State NC Zip Code 28304

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B9B58879FC

Amount of Each Disbursement this Period: 5.00

Memo Item

C. MOZIS, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7364 CHURCH STREET B

City YUCCA VALLEY State CA Zip Code 92284

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BFB251A0E/

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 25.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MRIZEK, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 730 HAVENWOOD DR

City LINCOLN State CA Zip Code 95648

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BBCFEF0576

Amount of Each Disbursement this Period: 25.00

Memo Item

B. MUCCILLO, HAROLD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address POBOX 1160

City BEAUMONT State CA Zip Code 92223

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA0BD297EE

Amount of Each Disbursement this Period: 5.00

Memo Item

C. MUIR, D. JEANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 241 NO. VINE ST., #307W

City SALT LAKE CITY State UT Zip Code 84103

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BC4D998DBI

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MULCZYNSKI, NAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7630 BIRCH BAY DRIVE

City BLAINE State WA Zip Code 98230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B85FC531FF

Amount of Each Disbursement this Period: 100.00

Memo Item

B. MULCZYNSKI, NAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7630 BIRCH BAY DRIVE

City BLAINE State WA Zip Code 98230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B17C96E145E

Amount of Each Disbursement this Period: 100.00

Memo Item

C. MULCZYNSKI, NAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7630 BIRCH BAY DRIVE

City BLAINE State WA Zip Code 98230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BF6DFE75B/

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

300.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MULCZYNSKI, NAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7630 BIRCH BAY DRIVE

City BLAINE State WA Zip Code 98230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B546A46D14I

Amount of Each Disbursement this Period: 100.00

Memo Item

B. MUMMA, MORTON, C., , III

Full Name (Last, First, Middle Initial)

Mailing Address 5708 WOODBURN ROAD

City RICHMOND State VA Zip Code 23225

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B285800FB0F

Amount of Each Disbursement this Period: 75.00

Memo Item

C. MUMMA, MORTON, C., , III

Full Name (Last, First, Middle Initial)

Mailing Address 5708 WOODBURN ROAD

City RICHMOND State VA Zip Code 23225

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA00B28FB0I

Amount of Each Disbursement this Period: 75.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. MURAD, ROB, , ,		Date of Disbursement MM / DD / YYYY 04 / 05 / 2021	
Mailing Address 46 CRAIG CT		FEC Identification Number C [REDACTED] Transaction ID : B9FB5F1850' Amount of Each Disbursement this Period 50.00	
City FORTSON	State GA	Zip Code 31808	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. MURAD, ROB, , ,		Date of Disbursement MM / DD / YYYY 04 / 05 / 2021	
Mailing Address 46 CRAIG CT		FEC Identification Number C [REDACTED] Transaction ID : BEA8DC3A79 Amount of Each Disbursement this Period 50.00	
City FORTSON	State GA	Zip Code 31808	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MURPHEY, THEODORE, L, ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 926 EAST COCHISE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B6EB5848D4 Amount of Each Disbursement this Period 5.00	
City PHOENIX	State AZ	Zip Code 85020	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURPHY, ODIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 176 S OAK BLUFF ST

City TRINITY State TX Zip Code 75862

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B9DA7BA7B

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MURPHY, ODIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 176 S OAK BLUFF ST

City TRINITY State TX Zip Code 75862

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B4CD987142

Amount of Each Disbursement this Period: 50.00

Memo Item

C. MURPHY, ODIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 176 S OAK BLUFF ST

City TRINITY State TX Zip Code 75862

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B9681EA2F1

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

150.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MURPHY, ODIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 176 S OAK BLUFF ST

City TRINITY State TX Zip Code 75862

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE2DD1CA75

Amount of Each Disbursement this Period: 50.00

Memo Item

B. MUSHEL, KEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3275 HICKORY RIDGE LN

City GREEN BAY State WI Zip Code 54311

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2021

FEC Identification Number: C

Transaction ID : B2FE1E2C0D

Amount of Each Disbursement this Period: 100.00

Memo Item

C. MUSHEL, KEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3275 HICKORY RIDGE LN

City GREEN BAY State WI Zip Code 54311

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2021

FEC Identification Number: C

Transaction ID : B832051082I

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ► 250.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MUSHEL, KEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3275 HICKORY RIDGE LN

City GREEN BAY State WI Zip Code 54311

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE60B8298F

Amount of Each Disbursement this Period: 100.00

Memo Item

B. MYERS, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 466 MILE BRANCH TD

City CANTON State GA Zip Code 30114

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2021

FEC Identification Number: C

Transaction ID : B889836AC4!

Amount of Each Disbursement this Period: 20.00

Memo Item

C. MYERS, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 466 MILE BRANCH TD

City CANTON State GA Zip Code 30114

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2021

FEC Identification Number: C

Transaction ID : B852128E9E

Amount of Each Disbursement this Period: 20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 140.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. MYERS, PATRICIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 466 MILE BRANCH TD

City CANTON State GA Zip Code 30114

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2021

FEC Identification Number: C

Transaction ID : BFC52E1C37

Amount of Each Disbursement this Period: 20.00

Memo Item

B. MYRES, RONALD, C, ,

Full Name (Last, First, Middle Initial)

Mailing Address 3019 7 LKS W

City WEST END State NC Zip Code 27376

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C

Transaction ID : B93FC443F66

Amount of Each Disbursement this Period: 7.50

Memo Item

C. NAIL, MARCELLA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4420 NAIL FARM ROAD

City MELBOURNE State FL Zip Code 32934

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B19C1C4F55

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 77.50

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NARDI, WANITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 351 CLIFFVIEW DR.
R

City GAHANNA State OH Zip Code 43230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B4AC4D7997

Amount of Each Disbursement this Period: 35.00

Memo Item

B. NARDI, WANITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 351 CLIFFVIEW DR.
R

City GAHANNA State OH Zip Code 43230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BA8998E2AE

Amount of Each Disbursement this Period: 35.00

Memo Item

C. NARDI, WANITA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 351 CLIFFVIEW DR.
R

City GAHANNA State OH Zip Code 43230

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BDFEA92188

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NARDI, WANITA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 351 CLIFFVIEW DR. R		FEC Identification Number C [REDACTED] Transaction ID : BE1296AE22 Amount of Each Disbursement this Period [REDACTED] 35.00	
City GAHANNA	State OH	Zip Code 43230	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. NASH, KEN, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 3620 WODLEY DR		FEC Identification Number C [REDACTED] Transaction ID : BF942AF691 Amount of Each Disbursement this Period [REDACTED] 50.00	
City SAN JOSE	State CA	Zip Code 95148	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. NAYLOR, RUSSELL, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 10283 SO STEEPLE VIEW CT		FEC Identification Number C [REDACTED] Transaction ID : BAEDE88DA Amount of Each Disbursement this Period [REDACTED] 15.00	
City SOUTH JORDAN	State UT	Zip Code 84095	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 100.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NAYLOR, RUSSELL, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 10283 SO STEEPLE VIEW CT		FEC Identification Number C [REDACTED] Transaction ID : B6FEFF6735I Amount of Each Disbursement this Period 35.00	
City SOUTH JORDAN	State UT	Zip Code 84095	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. NAYLOR, RUSSELL, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 10283 SO STEEPLE VIEW CT		FEC Identification Number C [REDACTED] Transaction ID : B95E7897E55 Amount of Each Disbursement this Period 15.00	
City SOUTH JORDAN	State UT	Zip Code 84095	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. NAYLOR, RUSSELL, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 10283 SO STEEPLE VIEW CT		FEC Identification Number C [REDACTED] Transaction ID : B4185CDD9E Amount of Each Disbursement this Period 35.00	
City SOUTH JORDAN	State UT	Zip Code 84095	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NAYLOR, RUSSELL, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 10283 SO STEEPLE VIEW CT		FEC Identification Number C [REDACTED]	
City SOUTH JORDAN	State UT	Zip Code 84095	Transaction ID : B20EA50CAF
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. NAYLOR, RUSSELL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 10283 SO STEEPLE VIEW CT		FEC Identification Number C [REDACTED]	
City SOUTH JORDAN	State UT	Zip Code 84095	Transaction ID : BD04736BD5
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. NAYLOR, RUSSELL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 10283 SO STEEPLE VIEW CT		FEC Identification Number C [REDACTED]	
City SOUTH JORDAN	State UT	Zip Code 84095	Transaction ID : B4FF66B4B0
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

65.00
[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEBEL, DAVID, , , SR

Full Name (Last, First, Middle Initial)

Mailing Address 12653 SEIPPEL RD

City PEOSTA State IA Zip Code 52068

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BEE28C4EEE

Amount of Each Disbursement this Period: 50.00

Memo Item

B. NEBEL, DAVID, , , SR

Full Name (Last, First, Middle Initial)

Mailing Address 12653 SEIPPEL RD

City PEOSTA State IA Zip Code 52068

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B7D9887D70:

Amount of Each Disbursement this Period: 50.00

Memo Item

C. NELSON, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1717 BRIGHT SHORE WAY

City WINDSOR State CO Zip Code 80550

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2021

FEC Identification Number: C

Transaction ID : B7A725B50C

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NEWCOMER, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6621 CIRCLE OAK

City BULVERDE State TX Zip Code 78163

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B37B7E6059

Amount of Each Disbursement this Period: 25.00

Memo Item

B. NEWMAN, DIANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10301 WINDBLUFF DRIVE

City HENRICO State VA Zip Code 23238-3617

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 26 / 2021

FEC Identification Number: C

Transaction ID : BF75FD2316C

Amount of Each Disbursement this Period: 5.00

Memo Item

C. NEWMAN, DIANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10301 WINDBLUFF DRIVE

City HENRICO State VA Zip Code 23238-3617

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 26 / 2021

FEC Identification Number: C

Transaction ID : B1BF38FB65

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 35.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NGUYEN, SI, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 3230 W140TH ST.		FEC Identification Number C [REDACTED] Transaction ID : B3CDF36088!
City CLEVELAND	State OH	Zip Code 44111
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. NGUYEN, VI, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 169 NINTH STREET TER		FEC Identification Number C [REDACTED] Transaction ID : BBC1CEAE0!
City COCHRAN	State GA	Zip Code 31014
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. NICHOLSON, BILL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 214 SWALLOW DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B35458D06A
City MCALESTER	State OK	Zip Code 74501
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 75.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 135.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NICHOLSON, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2021	
Mailing Address 8812 IVYMILL PL. SO.		FEC Identification Number C [REDACTED] Transaction ID : B28CF7174C Amount of Each Disbursement this Period 25.00	
City JACKSONVILLE	State FL	Zip Code 32244	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. NICHOLSON, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2021	
Mailing Address 8812 IVYMILL PL. SO.		FEC Identification Number C [REDACTED] Transaction ID : B853BF4C8F Amount of Each Disbursement this Period 25.00	
City JACKSONVILLE	State FL	Zip Code 32244	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. NIEDERHAUSER, PAULA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8131 CEDAR POINT RD		FEC Identification Number C [REDACTED] Transaction ID : BFDE107670 Amount of Each Disbursement this Period 25.00	
City OREGON	State OH	Zip Code 43616	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NIELSEN, SUSAN, O, ,

Full Name (Last, First, Middle Initial)

Mailing Address 200 AUBURN AVE.

City MONROE State LA Zip Code 71201

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BA77064C77

Amount of Each Disbursement this Period: 25.00

Memo Item

B. NIENOW, LYLE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3777 LEE LANE SE

City ROCHESTER State MN Zip Code 55904

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BB921451A3f

Amount of Each Disbursement this Period: 50.00

Memo Item

C. NIENOW, LYLE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3777 LEE LANE SE

City ROCHESTER State MN Zip Code 55904

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1E0160E73

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NIENOW, LYLE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3777 LEE LANE SE		FEC Identification Number C [REDACTED] Transaction ID : BE914FEB4F Amount of Each Disbursement this Period 50.00	
City ROCHESTER	State MN	Zip Code 55904	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. NIENOW, LYLE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3777 LEE LANE SE		FEC Identification Number C [REDACTED] Transaction ID : B20F0DB073! Amount of Each Disbursement this Period 50.00	
City ROCHESTER	State MN	Zip Code 55904	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. NIHISER, WARD, , ,		Date of Disbursement MM / DD / YYYY 03 / 04 / 2021	
Mailing Address 1008 LANTANA CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : BE61403B15 Amount of Each Disbursement this Period 25.00	
City GEORGETOWN	State SC	Zip Code 29440	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NOBLE, JAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8605 SAVOY LANE

City O FALLON State IL Zip Code 62269-4140

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B092B1058F

Amount of Each Disbursement this Period: 35.00

Memo Item

B. NOLAN, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 911 VIRGINIA ST

City LYNCHBURG State VA Zip Code 24504

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B992AC4737I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. NOLAN, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 911 VIRGINIA ST

City LYNCHBURG State VA Zip Code 24504

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B589B6071A

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

85.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NOLAN, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 911 VIRGINIA ST

City LYNCHBURG State VA Zip Code 24504

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B8733577037

Amount of Each Disbursement this Period: 25.00

Memo Item

B. NOLAN, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 911 VIRGINIA ST

City LYNCHBURG State VA Zip Code 24504

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BDA5B7ADA

Amount of Each Disbursement this Period: 25.00

Memo Item

C. NOLAN, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 911 VIRGINIA ST

City LYNCHBURG State VA Zip Code 24504

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B634739BAA

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NORCROSS, MICHELLE, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 06 / 2021	
Mailing Address 42 MCCORMICK TRL			FEC Identification Number C [REDACTED] Transaction ID : B97D638019Z Amount of Each Disbursement this Period [REDACTED] 35.00	
City MILFORD	State OH	Zip Code 45150	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: _____ District: _____				
Full Name (Last, First, Middle Initial) B. NORCROSS, MICHELLE, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 06 / 2021	
Mailing Address 42 MCCORMICK TRL			FEC Identification Number C [REDACTED] Transaction ID : B6F8DF35CC Amount of Each Disbursement this Period [REDACTED] 35.00	
City MILFORD	State OH	Zip Code 45150	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: _____ District: _____				
Full Name (Last, First, Middle Initial) C. NORCROSS, MICHELLE, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 06 / 2021	
Mailing Address 42 MCCORMICK TRL			FEC Identification Number C [REDACTED] Transaction ID : BD5C486490 Amount of Each Disbursement this Period [REDACTED] 35.00	
City MILFORD	State OH	Zip Code 45150	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: _____ District: _____				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 105.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NOWAK, CONNIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8918 CUYAMACA

City CORONA State CA Zip Code 92983

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BFBF17E9B1

Amount of Each Disbursement this Period: 15.00

Memo Item

B. NUGENT, ROBBIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1107 GUY AVE

City BASTROP State LA Zip Code 71220

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB358843100

Amount of Each Disbursement this Period: 25.00

Memo Item

C. NUGENT, T J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3695 AMBERLY CIRCLE E-306

City NAPLES State FL Zip Code 34112

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B27901BA12

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. NUNEZ, GEORGE, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 28 / 2021	
Mailing Address 18 KINGS LAKE ESTATES BOULEVARD				
City HUMBLE	State TX	Zip Code 77346	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : BF54A81CF4 Amount of Each Disbursement this Period [REDACTED] 50.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. NUNEZ, GEORGE, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 02 / 24 / 2021	
Mailing Address 18 KINGS LAKE ESTATES BOULEVARD				
City HUMBLE	State TX	Zip Code 77346	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : B140F090380 Amount of Each Disbursement this Period [REDACTED] 50.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. NUNEZ, GEORGE, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 02 / 24 / 2021	
Mailing Address 18 KINGS LAKE ESTATES BOULEVARD				
City HUMBLE	State TX	Zip Code 77346	FEC Identification Number C [REDACTED]	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Transaction ID : B79C563A83 Amount of Each Disbursement this Period [REDACTED] 50.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 150.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. NYGREN, VELI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2523 VETERAN HEIGHTS

City COLORADO SPRINGS State CO Zip Code 80904

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 29 / 2021

FEC Identification Number: C

Transaction ID : B71B23AA5F

Amount of Each Disbursement this Period: 10.00

Memo Item

B. OBRIEN, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 243 HAMPSHIRE WOODS LOOP P.O BOX 1 APT 1

City ERROL State NH Zip Code 03579

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BB2F1711E04

Amount of Each Disbursement this Period: 25.00

Memo Item

C. OCASIO, GRACE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7800 MEADOWDALE LANE

City CHARLOTTE State NC Zip Code 28212

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B8E93566DB

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. O'CONNOR, ANNIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 661 BERING DRIVE
403

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BCE8FB9313

Amount of Each Disbursement this Period: 25.00

Memo Item

B. OLMSTEAD, GLORIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 772 WEST G ROAD

City HUNTLEY State MT Zip Code 59037

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BB2A9CD49D

Amount of Each Disbursement this Period: 50.00

Memo Item

C. OLSEN, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2 FRIENDS WAY

City SAINT JAMES State NY Zip Code 11780

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 22 / 2021

FEC Identification Number: C

Transaction ID : B4724180F4;

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2575.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. O'MALLEY, MARYJANE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 190 FOXTAIL. CIRCLE		FEC Identification Number C [REDACTED]	
City ARCHBALD	State PA	Zip Code 18403	Transaction ID : B658F6171E/
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. OPENSHAW, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 314 N. 1100 E. #H3		FEC Identification Number C [REDACTED]	
City LEHI	State UT	Zip Code 84043	Transaction ID : BB90862DFFI
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ORENSTEIN, PHIL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 224-12 STRONGHURST AVE.		FEC Identification Number C [REDACTED]	
City QUEENS VILLAGE	State NY	Zip Code 11427	Transaction ID : B30FC97E18
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ORSINI, JOSEPH, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 845 AZALEA CT		FEC Identification Number C [REDACTED] Transaction ID : B204A3C7C4 Amount of Each Disbursement this Period [REDACTED] 100.00
City LINCOLN	State CA	Zip Code 95648
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. ORTENSE, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 11MINNISINK AVE		FEC Identification Number C [REDACTED] Transaction ID : BB5AD6CCA1 Amount of Each Disbursement this Period [REDACTED] 25.00
City TOTOWA	State NJ	Zip Code 07512
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. ORTIZ, MARYGINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 188 STEADWELL RD		FEC Identification Number C [REDACTED] Transaction ID : B71A2B4A9C Amount of Each Disbursement this Period [REDACTED] 35.00
City AMSTERDAM	State NY	Zip Code 12010
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶

160.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ORTIZ, MARYGINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 188 STEADWELL RD		FEC Identification Number C [REDACTED] Transaction ID : BC7A80D737	
City AMSTERDAM	State NY	Zip Code 12010	Amount of Each Disbursement this Period [REDACTED] 35.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ORTIZ, MARYGINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 188 STEADWELL RD		FEC Identification Number C [REDACTED] Transaction ID : B594C0E88E	
City AMSTERDAM	State NY	Zip Code 12010	Amount of Each Disbursement this Period [REDACTED] 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ORTIZ, MARYGINA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 188 STEADWELL RD		FEC Identification Number C [REDACTED] Transaction ID : B3CA4C1BE	
City AMSTERDAM	State NY	Zip Code 12010	Amount of Each Disbursement this Period [REDACTED] 35.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 120.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ORTIZ, MARYGINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 188 STEADWELL RD

City AMSTERDAM State NY Zip Code 12010

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B1F3AF3B31

Amount of Each Disbursement this Period: 35.00

Memo Item

B. ORTIZ, MARYGINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 188 STEADWELL RD

City AMSTERDAM State NY Zip Code 12010

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BEF8676CEE

Amount of Each Disbursement this Period: 35.00

Memo Item

C. OSEMWEGIE, ADESUWA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9120 LAMBSKIN LANE

City COLUMBIA State MD Zip Code 21045

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B24FB87D3E

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. OSEMWEGIE, ADESUWA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 9120 LAMBSKIN LANE		FEC Identification Number C [REDACTED] Transaction ID : BA92AAB352 Amount of Each Disbursement this Period [REDACTED] 25.00	
City COLUMBIA	State MD	Zip Code 21045	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. OTTERSON, CURT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7683 NICHOLAS WAY		FEC Identification Number C [REDACTED] Transaction ID : B2898ABF48I Amount of Each Disbursement this Period [REDACTED] 15.00	
City CHANHASSEN	State MN	Zip Code 55317	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. OTTERSON, CURT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7683 NICHOLAS WAY		FEC Identification Number C [REDACTED] Transaction ID : B92BD523D9I Amount of Each Disbursement this Period [REDACTED] 15.00	
City CHANHASSEN	State MN	Zip Code 55317	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 55.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. OTTERSON, CURT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7683 NICHOLAS WAY		FEC Identification Number C [REDACTED] Transaction ID : BCEF3D32AC Amount of Each Disbursement this Period 15.00	
City CHANHASSEN	State MN	Zip Code 55317	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. OTTERSON, CURT, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 7683 NICHOLAS WAY		FEC Identification Number C [REDACTED] Transaction ID : BC7E5B5183! Amount of Each Disbursement this Period 15.00	
City CHANHASSEN	State MN	Zip Code 55317	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. OUTLAW, LAURA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 606 AUTUMNWOOD FOREST DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B3BC65FC0! Amount of Each Disbursement this Period 25.00	
City LAKE SAINT LOUIS	State MO	Zip Code 63367	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OWEN, BRIAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3810 27TH STREET

City LUBBOCK State TX Zip Code 79410

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : B72AA19CF6

Amount of Each Disbursement this Period: 5.00

Memo Item

B. OWEN, BRIAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3810 27TH STREET

City LUBBOCK State TX Zip Code 79410

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : B453F66DC71

Amount of Each Disbursement this Period: 5.00

Memo Item

C. OWEN, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 395 COUNTY ROAD 540

City JACKSON State MO Zip Code 63755

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BDD313563E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. OWEN, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3221 WALTON WAY

City AUGUSTA State GA Zip Code 30909

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BB3E1841D4**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. PACK, EARL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 37056 N.KIMBERWICK LN

City WADSWORTH State IL Zip Code 60083

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BC7AC5811F**

Amount of Each Disbursement this Period: 100.00

Memo Item

C. PACK, EARL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 37056 N.KIMBERWICK LN

City WADSWORTH State IL Zip Code 60083

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B5CBEDFF7**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PALACIOS, THERESA, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 1619 HAVELOCK DR.		FEC Identification Number C [REDACTED] Transaction ID : B82E4EE0F4 Amount of Each Disbursement this Period 25.00	
City SPRING	State TX	Zip Code 77386	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. PALAZZOLA, RITA, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 154 VINELAND AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B33CD8FD97 Amount of Each Disbursement this Period 15.00	
City STATEN ISLAND	State NY	Zip Code 10312	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PALAZZOLA, RITA, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 154 VINELAND AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BBDA612E1 Amount of Each Disbursement this Period 15.00	
City STATEN ISLAND	State NY	Zip Code 10312	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PALM, MARJA JYRI, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address PO BOX 515 A224		FEC Identification Number C [REDACTED] Transaction ID : B4BC61A964
City LATHAM	State NY	Zip Code 12110
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. PANKE, DAVID, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 1856 E CHIMERE DR		FEC Identification Number C [REDACTED] Transaction ID : B905579A357
City MERIDIAN	State ID	Zip Code 83646
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. PARKER, YVONNE, , ,		Date of Disbursement MM / DD / YYYY 04 / 13 / 2021
Mailing Address 185 ESTABAN DR		FEC Identification Number C [REDACTED] Transaction ID : B254CC81C
City CAMARILLO	State CA	Zip Code 93010
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PARKER, YVONNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 185 ESTABAN DR

City CAMARILLO State CA Zip Code 93010

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2021

FEC Identification Number: C

Transaction ID : **BD8E8F9792I**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. PARKER, YVONNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 185 ESTABAN DR

City CAMARILLO State CA Zip Code 93010

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BFD5CE2FEE**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. PARKER, YVONNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 185 ESTABAN DR

City CAMARILLO State CA Zip Code 93010

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BCCCB8873I**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PARKINSON, REX, , ,			Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 404 PALMER WAY			FEC Identification Number C [REDACTED] Transaction ID : BE8DA3E7D4 Amount of Each Disbursement this Period [REDACTED] 35.00	
City SUNSET	State SC	Zip Code 29685	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			
Full Name (Last, First, Middle Initial) B. PASICKI, JAREK, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address P.O. BOX 2441			FEC Identification Number C [REDACTED] Transaction ID : BE8B6E2CA6 Amount of Each Disbursement this Period [REDACTED] 35.00	
City EDGARTOWN	State MA	Zip Code 02539	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			
Full Name (Last, First, Middle Initial) C. PATERSON, GILLIAN, , ,			Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 255 VAUGHAN DRIVE APT241			FEC Identification Number C [REDACTED] Transaction ID : BFFDF814E Amount of Each Disbursement this Period [REDACTED] 15.00	
City ALPHARETTA	State GA	Zip Code 30009	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 85.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PATTERSON, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 710 BAY ST		FEC Identification Number C [REDACTED] Transaction ID : BAC901CB79 Amount of Each Disbursement this Period 25.00
City PETOSKEY	State MI	Zip Code 49770
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. PATTERSON, MARLENE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 6908 DESCO DR		FEC Identification Number C [REDACTED] Transaction ID : BE1A31057E: Amount of Each Disbursement this Period 50.00
City DALLAS	State TX	Zip Code 75225
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. PATTERSON, MARLENE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 6908 DESCO DR		FEC Identification Number C [REDACTED] Transaction ID : B79B28DDE: Amount of Each Disbursement this Period 50.00
City DALLAS	State TX	Zip Code 75225
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PATTERSON, MARLENE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 6908 DESCO DR		FEC Identification Number C [REDACTED]	
City DALLAS	State TX	Zip Code 75225	Transaction ID : B75B980E3E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. PATTERSON, MARLENE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 6908 DESCO DR		FEC Identification Number C [REDACTED]	
City DALLAS	State TX	Zip Code 75225	Transaction ID : B61A0B0EC2
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PATTERSON, MARLENE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 6908 DESCO DR		FEC Identification Number C [REDACTED]	
City DALLAS	State TX	Zip Code 75225	Transaction ID : B6DE00E535
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PAWLO, CHRISTINE, , ,		Date of Disbursement MM / DD / YYYY 01 / 19 / 2021	
Mailing Address 108 COMPTON ST		FEC Identification Number C [REDACTED] Transaction ID : BFE91FDD04 Amount of Each Disbursement this Period 50.00	
City BELFORD	State NJ	Zip Code 07718	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. PAYNE, PAMELA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 1215 WELLSHIRE DR		FEC Identification Number C [REDACTED] Transaction ID : BA68D3C45A Amount of Each Disbursement this Period 25.00	
City KATY	State TX	Zip Code 77494	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. PEAK, SHARON, K., MS,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 1051 SE 750		FEC Identification Number C [REDACTED] Transaction ID : BF4A15130D Amount of Each Disbursement this Period 50.00	
City DEEPWATER	State MO	Zip Code 64740	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PEARCE, BEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 716 MIRA VISTA DRIVE

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B263EFF03A

Amount of Each Disbursement this Period: 25.00

Memo Item

B. PEARSON, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1501 BACON BRIDGE RD

City SUMMERVILLE State SC Zip Code 29485

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BDBC96E3A5

Amount of Each Disbursement this Period: 100.00

Memo Item

C. PECKER, AVNER, MARK, ,

Full Name (Last, First, Middle Initial)

Mailing Address 3154 ASH LITTLE RIVER RD

City ASH State NC Zip Code 28420

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BDB6121795

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes, where 28a is checked.

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NAME OF COMMITTEE (In Full) THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: PECKER, AVNER, MARK, . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: PECSI, WILLIAM, . . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: PEOPLES, CHARLENE, . . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

SUBTOTAL of Disbursements This Page (optional) 130.00
TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PEOPLES, CHARLENE, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2021	
Mailing Address 3311 WINN DR		FEC Identification Number C [REDACTED] Transaction ID : B3C7C8EAF0 Amount of Each Disbursement this Period 5.00	
City AUGUSTA	State GA	Zip Code 30906	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. PEPIN, EARL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 38326 S GRUMMAN LANE		FEC Identification Number C [REDACTED] Transaction ID : B1F9F779196 Amount of Each Disbursement this Period 35.00	
City MARANA	State AZ	Zip Code 85658	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. PERDUE, REBECCA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 6067 SPOTTED TAIL CT		FEC Identification Number C [REDACTED] Transaction ID : B15431381C Amount of Each Disbursement this Period 35.00	
City DUBLIN	State OH	Zip Code 43017	Category/Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PERDUE, REBECCA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 6067 SPOTTED TAIL CT		FEC Identification Number C [REDACTED] Transaction ID : BA6745F15E! Amount of Each Disbursement this Period [REDACTED] 35.00
City DUBLIN	State OH	Zip Code 43017
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PERDUE, REBECCA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 6067 SPOTTED TAIL CT		FEC Identification Number C [REDACTED] Transaction ID : B26B1CCECE Amount of Each Disbursement this Period [REDACTED] 35.00
City DUBLIN	State OH	Zip Code 43017
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PERETH, SCOTT, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1621 CLOVER LANE		FEC Identification Number C [REDACTED] Transaction ID : BF5652D0DF Amount of Each Disbursement this Period [REDACTED] 100.00
City FORT WORTH	State TX	Zip Code 76107-3902
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 170.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PERETH, SCOTT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1621 CLOVER LANE

City FORT WORTH State TX Zip Code 76107-3902

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B57D003534E

Amount of Each Disbursement this Period: 100.00

Memo Item

B. PERETH, SCOTT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1621 CLOVER LANE

City FORT WORTH State TX Zip Code 76107-3902

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B3D0B357B3I

Amount of Each Disbursement this Period: 100.00

Memo Item

C. PERETH, SCOTT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1621 CLOVER LANE

City FORT WORTH State TX Zip Code 76107-3902

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B0EA26AB4I

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PERRY, JUSTIN, , MR,		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021	
Mailing Address 200 NEBRASKA AVE		FEC Identification Number C [REDACTED] Transaction ID : BA23A54069I	
City COLUMBIA	State MO	Zip Code 65203	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. PETERSON, CHANDRA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 10220 IMPERIAL POINTE AVE		FEC Identification Number C [REDACTED] Transaction ID : B8F1155B744	
City LAS VEGAS	State NV	Zip Code 89134	Amount of Each Disbursement this Period 20.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PETLICK, MARIA, L, ,		Date of Disbursement MM / DD / YYYY 01 / 25 / 2021	
Mailing Address 10660 OLD SAINT AUGUSTINE RD		FEC Identification Number C [REDACTED] Transaction ID : BEF9F8F644	
City JACKSONVILLE	State FL	Zip Code 32257	Amount of Each Disbursement this Period 30.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PETRESCU, GABRIELA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2445 EDENDERRY DR		FEC Identification Number C [REDACTED] Transaction ID : BECBBABC4	
City COLORADO SPRINGS	State CO	Zip Code 80919	Amount of Each Disbursement this Period [REDACTED] 100.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. PETRESCU, GABRIELA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2445 EDENDERRY DR		FEC Identification Number C [REDACTED] Transaction ID : B5B1246B35I	
City COLORADO SPRINGS	State CO	Zip Code 80919	Amount of Each Disbursement this Period [REDACTED] 100.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PETRESCU, GABRIELA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2445 EDENDERRY DR		FEC Identification Number C [REDACTED] Transaction ID : BFD5F1FBEI	
City COLORADO SPRINGS	State CO	Zip Code 80919	Amount of Each Disbursement this Period [REDACTED] 100.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 300.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETRESCU, GABRIELA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2445 EDENDERRY DR

City COLORADO SPRINGS State CO Zip Code 80919

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2BE801CBE

Amount of Each Disbursement this Period: 100.00

Memo Item

B. PETRONE, LOUIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11926 ESTY WAY

City CARMEL State IN Zip Code 46033

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1C5F6B275:

Amount of Each Disbursement this Period: 50.00

Memo Item

C. PETRONE, LOUIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11926 ESTY WAY

City CARMEL State IN Zip Code 46033

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B84ABB3F6:

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PETRONE, LOUIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11926 ESTY WAY

City CARMEL State IN Zip Code 46033

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4520F8634F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. PETTIT, HARRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8061 OLD HAGERSTOWN RD

City MIDDLETOWN State MD Zip Code 21769

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE083130077

Amount of Each Disbursement this Period: 100.00

Memo Item

C. PEZZOPANE, BEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4447 38 STREET

City SAN DIEGO State CA Zip Code 92116

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B5E1D65DE5

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 165.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PHAM, HENRY, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 1229 LAWLOR DR		FEC Identification Number C [REDACTED] Transaction ID : BF74B7FE5E Amount of Each Disbursement this Period 25.00	
City FREDERICK	State MD	Zip Code 21702-2159	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. PHAM, MICHAEL, H, ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 9658, WESTMINSTER AVE TRLR 51		FEC Identification Number C [REDACTED] Transaction ID : BC2B258164I Amount of Each Disbursement this Period 10.00	
City GARDEN GROVE	State CA	Zip Code 92844	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. PHELPS, CINDY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 114 VARENNES COVE		FEC Identification Number C [REDACTED] Transaction ID : B41773CCF4 Amount of Each Disbursement this Period 15.00	
City LITTLE ROCK	State AR	Zip Code 72223	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILLIPS, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 486 LAGOON DRIVE

City OVIEDO State FL Zip Code 32765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDE85C85A3

Amount of Each Disbursement this Period: 100.00

Memo Item

B. PHILLIPS, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 486 LAGOON DRIVE

City OVIEDO State FL Zip Code 32765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B12C0982F11

Amount of Each Disbursement this Period: 100.00

Memo Item

C. PHILLIPS, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 486 LAGOON DRIVE

City OVIEDO State FL Zip Code 32765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B42CFDAFC

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILLIPS, DON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 486 LAGOON DRIVE

City OVIEDO State FL Zip Code 32765

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B15343420A4

Amount of Each Disbursement this Period: 100.00

Memo Item

B. PHILLIPS, GREGORY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 26 CALIFORNIA STREET

City LONG BEACH State NY Zip Code 11561

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BF3CBA5826

Amount of Each Disbursement this Period: 50.00

Memo Item

C. PHILLIPS, GREGORY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 26 CALIFORNIA STREET

City LONG BEACH State NY Zip Code 11561

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B958F738DF

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PHILLIPS, GREGORY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 26 CALIFORNIA STREET

City LONG BEACH State NY Zip Code 11561

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BBC825A195**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. PHILLIPS, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 CASA GRANDE DR

City RED BLUFF State CA Zip Code 96080

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : **B4661289F04**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. PHILLIPS, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6 CASA GRANDE DR

City RED BLUFF State CA Zip Code 96080

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : **B1583EC060**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PICKARD, AVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1500 PLANTATION OAKS DRIVE
2303

City ROANOKE State TX Zip Code 76262

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B7D7913F3D
Amount of Each Disbursement this Period: 25.00

Memo Item

B. PICKARD, AVA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1500 PLANTATION OAKS DRIVE
2303

City ROANOKE State TX Zip Code 76262

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : BBFCE4F722
Amount of Each Disbursement this Period: 25.00

Memo Item

C. PIERMAN, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2057 N VISTA SPRINGS DR

City WASHINGTON State UT Zip Code 84780

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B910A8EFF0
Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PIQUER, LOURDES, , ,		Date of Disbursement MM / DD / YYYY 03 / 19 / 2021	
Mailing Address 501 PERCH LANE		FEC Identification Number C [REDACTED] Transaction ID : B556C613A11 Amount of Each Disbursement this Period 15.00	
City SEBASTIAN	State FL	Zip Code 32958	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. PIQUER, LOURDES, , ,		Date of Disbursement MM / DD / YYYY 03 / 19 / 2021	
Mailing Address 501 PERCH LANE		FEC Identification Number C [REDACTED] Transaction ID : B98B0DB0F1: Amount of Each Disbursement this Period 15.00	
City SEBASTIAN	State FL	Zip Code 32958	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. PISKOS, GEORGE, , ,		Date of Disbursement MM / DD / YYYY 02 / 18 / 2021	
Mailing Address 1808 CARRINGTON WAY		FEC Identification Number C [REDACTED] Transaction ID : B17A48773E Amount of Each Disbursement this Period 50.00	
City BELLEVILLE	State IL	Zip Code 62226	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PITCHFORD, DAVID, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 194 LAFAYETTE RD 11N 11 N		FEC Identification Number C [REDACTED] Transaction ID : B3B214BF9E Amount of Each Disbursement this Period 50.00
City SALISBURY	State MA	Zip Code 01952
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PITTMON, CAROLYN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 1420 KEISA		FEC Identification Number C [REDACTED] Transaction ID : B81017A0292 Amount of Each Disbursement this Period 35.00
City IRVING	State TX	Zip Code 75060
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PITTMON, CAROLYN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 1420 KEISA		FEC Identification Number C [REDACTED] Transaction ID : BB52892974 Amount of Each Disbursement this Period 35.00
City IRVING	State TX	Zip Code 75060
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PITZER, MIKE, , , SR

Full Name (Last, First, Middle Initial)

Mailing Address 1205 E. PATUXENT DR.

City LA PLATA State MD Zip Code 20646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B0C3A44226I

Amount of Each Disbursement this Period: 25.00

Memo Item

B. PLATT, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 18150 REDBUD CIR.

City FOUNTAIN VALLEY State CA Zip Code 92708

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2021

FEC Identification Number: C

Transaction ID : B9D221CE7D

Amount of Each Disbursement this Period: 35.00

Memo Item

C. PLATT, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 18150 REDBUD CIR.

City FOUNTAIN VALLEY State CA Zip Code 92708

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2021

FEC Identification Number: C

Transaction ID : B4709C9C5E

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PLATT, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2021
Mailing Address 18150 REDBUD CIR.		FEC Identification Number C [REDACTED] Transaction ID : B6513BA6361 Amount of Each Disbursement this Period 35.00
City FOUNTAIN VALLEY	State CA	Zip Code 92708
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PLAVNY, ANDREW, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 7170 BERESFORD AVE.		FEC Identification Number C [REDACTED] Transaction ID : BF1FF3D7EB Amount of Each Disbursement this Period 25.00
City PARMA	State OH	Zip Code 44130
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PLawecki, WILLIAM, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 222 SW 16TH TERRACE		FEC Identification Number C [REDACTED] Transaction ID : BEEE937688 Amount of Each Disbursement this Period 5.00
City CAPE CORAL	State FL	Zip Code 33991
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PLAYTON, GEORGE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 2422 ENFIELD GROVE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BE26AC2426 Amount of Each Disbursement this Period [REDACTED] 35.00
City SAN ANTONIO	State TX	Zip Code 78231-2232
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. POIKONEN, ANNA-MARIE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address WARREN ROAD		FEC Identification Number C [REDACTED] Transaction ID : BF0C7084043 Amount of Each Disbursement this Period [REDACTED] 1.00
City WALNUT CREEK	State CA	Zip Code 94595
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. POOL, J C, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 3742 COUNTY ROAD 1725 E		FEC Identification Number C [REDACTED] Transaction ID : B0AB18A033 Amount of Each Disbursement this Period [REDACTED] 50.00
City BROUGHTON	State IL	Zip Code 62817
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

86.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POOL, J C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3742 COUNTY ROAD 1725 E

City BROUGHTON State IL Zip Code 62817

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BEEA033F09

Amount of Each Disbursement this Period: 50.00

Memo Item

B. POOL, J C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3742 COUNTY ROAD 1725 E

City BROUGHTON State IL Zip Code 62817

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BB2AB9A249

Amount of Each Disbursement this Period: 50.00

Memo Item

C. POOL, J C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3742 COUNTY ROAD 1725 E

City BROUGHTON State IL Zip Code 62817

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC7AF7CBF

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. POORE, DELLIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1099 HALE- POORE RD

City PALL MALL State TN Zip Code 38577

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BCA3B4E8E1**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. POORE, DELLIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1099 HALE- POORE RD

City PALL MALL State TN Zip Code 38577

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BD2ABB415E**

Amount of Each Disbursement this Period: 15.00

Memo Item

C. POPHAM, JOSEPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2408 HEATHER HILL COURT

City BELLEVILLE State IL Zip Code 62221

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BAD84E3DE1**

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 35.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PORTON, WILLIAM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 609 ENCINO PL. NE
707

City ALBUQUERQUE State NM Zip Code 87102

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B904FE7558C

Amount of Each Disbursement this Period: 10.00

Memo Item

B. PRESTIPINO, CATHERINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1012 GRANTHAM LANE

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : B19034CCA0

Amount of Each Disbursement this Period: 50.00

Memo Item

C. PRESTIPINO, CATHERINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1012 GRANTHAM LANE

City CHESAPEAKE State VA Zip Code 23322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : BC948EA811

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PRESTIPINO, CATHERINE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 1012 GRANTHAM LANE		FEC Identification Number C [REDACTED] Transaction ID : B9A0822122C Amount of Each Disbursement this Period 50.00
City CHESAPEAKE	State VA	Zip Code 23322
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. PRESTIPINO, CATHERINE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1012 GRANTHAM LANE		FEC Identification Number C [REDACTED] Transaction ID : B0C0795720A Amount of Each Disbursement this Period 50.00
City CHESAPEAKE	State VA	Zip Code 23322
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PRIFTI, EKTOR, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1100 OXFORD ST		FEC Identification Number C [REDACTED] Transaction ID : BBFF65C1BI Amount of Each Disbursement this Period 50.00
City DOWNERS GROVE	State IL	Zip Code 60516
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. PROEBER, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2021	
Mailing Address 108 UPCERNE RD		FEC Identification Number C [REDACTED] Transaction ID : B158E62283C Amount of Each Disbursement this Period 25.00	
City SUMMERVILLE	State SC	Zip Code 29485	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. PRUITT, CHERI, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 1610 EAST HARDING STREET		FEC Identification Number C [REDACTED] Transaction ID : BED3832313C Amount of Each Disbursement this Period 25.00	
City MORRILTON	State AR	Zip Code 72110	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. PRUNER, DONNA, , ,		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021	
Mailing Address 5166 NW 109 TERR		FEC Identification Number C [REDACTED] Transaction ID : B56D34F3F3 Amount of Each Disbursement this Period 25.00	
City CORAL SPRINGS	State FL	Zip Code 33076	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PRUNER, DONNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5166 NW 109 TERR

City CORAL SPRINGS State FL Zip Code 33076

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C

Transaction ID : B0748EF75E1

Amount of Each Disbursement this Period: 25.00

Memo Item

B. PUYOT, JANELLA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2940,7 AVE NO

City SAINT PETERSBURG State FL Zip Code 33713

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B6A555A7531

Amount of Each Disbursement this Period: 15.00

Memo Item

C. RAASCH, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1960 LAS PALMAS LN. 138

City LAUGHLIN State NV Zip Code 89029

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BC7B71AED

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RACHKOVSKY, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 02 / 17 / 2021	
Mailing Address 43 SERAFIN COURT		FEC Identification Number C [REDACTED] Transaction ID : B1BF8AB8AE Amount of Each Disbursement this Period 25.00	
City HAMDEN	State CT	Zip Code 06518	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. RADCLIFFE, BRETT, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 24641 CALLE EL TORO GRANDE		FEC Identification Number C [REDACTED] Transaction ID : BCB697FBD1 Amount of Each Disbursement this Period 35.00	
City LAKE FOREST	State CA	Zip Code 92630	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. RADCLIFFE, BRETT, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 24641 CALLE EL TORO GRANDE		FEC Identification Number C [REDACTED] Transaction ID : B9170C7A43 Amount of Each Disbursement this Period 35.00	
City LAKE FOREST	State CA	Zip Code 92630	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RADCLIFFE, BRETT, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 24641 CALLE EL TORO GRANDE		FEC Identification Number C [REDACTED] Transaction ID : BCAC593A76 Amount of Each Disbursement this Period 35.00	
City LAKE FOREST	State CA	Zip Code 92630	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. RADCLIFFE, BRETT, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 24641 CALLE EL TORO GRANDE		FEC Identification Number C [REDACTED] Transaction ID : B69C8C8EB7 Amount of Each Disbursement this Period 35.00	
City LAKE FOREST	State CA	Zip Code 92630	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. RAINES, CYNTHIA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 17214 TAMARACK DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BB849A584C Amount of Each Disbursement this Period 100.00	
City WILLIAMSPORT	State MD	Zip Code 21795	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

170.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAINES, CYNTHIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17214 TAMARACK DRIVE

City WILLIAMSPORT State MD Zip Code 21795

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B153B83B51

Amount of Each Disbursement this Period: 100.00

Memo Item

B. RAINES, CYNTHIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17214 TAMARACK DRIVE

City WILLIAMSPORT State MD Zip Code 21795

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BF0C2529A3

Amount of Each Disbursement this Period: 100.00

Memo Item

C. RAINES, CYNTHIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17214 TAMARACK DRIVE

City WILLIAMSPORT State MD Zip Code 21795

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4281F9AF9

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RALIDIS, DONNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 217 BRICKELL WAY

City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B891B8C5AA

Amount of Each Disbursement this Period: 40.00

Memo Item

B. RAMBADT, STANLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 206 W SOUTH ST

City STURGIS State MI Zip Code 49091

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BEED5B730F

Amount of Each Disbursement this Period: 25.00

Memo Item

C. RAMIREZ, ALBERTO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1718 ELK RIVER

City HOUSTON State TX Zip Code 77090

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B54DD4B333

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 80.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RAMIREZ, ALBERTO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1718 ELK RIVER		FEC Identification Number C [REDACTED] Transaction ID : BF2E775611E Amount of Each Disbursement this Period 15.00	
City HOUSTON	State TX	Zip Code 77090	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. RAMIREZ, ALBERTO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1718 ELK RIVER		FEC Identification Number C [REDACTED] Transaction ID : B1E0BA8637I Amount of Each Disbursement this Period 25.00	
City HOUSTON	State TX	Zip Code 77090	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. RAMIREZ, ALBERTO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1718 ELK RIVER		FEC Identification Number C [REDACTED] Transaction ID : B43B5EB637 Amount of Each Disbursement this Period 15.00	
City HOUSTON	State TX	Zip Code 77090	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RAMIREZ, ALBERTO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1718 ELK RIVER

City HOUSTON State TX Zip Code 77090

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B687EEF089

Amount of Each Disbursement this Period: 25.00

Memo Item

B. RAOFI, WAHAB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 29 ESTERNAY DR

City FOOTHILL RANCH State CA Zip Code 92610

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2021

FEC Identification Number: C

Transaction ID : B77D2A5FEE

Amount of Each Disbursement this Period: 25.00

Memo Item

C. RAOFI, WAHAB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 29 ESTERNAY DR

City FOOTHILL RANCH State CA Zip Code 92610

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2021

FEC Identification Number: C

Transaction ID : BE26013AE9

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RARDIN, MARIANNE, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 2656 SE 19TH PL

City CAPE CORAL State FL Zip Code 33904

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C
Transaction ID : B8CE4FA5BE
Amount of Each Disbursement this Period: 10.00

Memo Item

B. RAY, HOWARD, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 2500 EDWARDS DRIVE 315

City FORT MYERS State FL Zip Code 33901

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C
Transaction ID : BB3484CAE8
Amount of Each Disbursement this Period: 50.00

Memo Item

C. REDD, HOWARD, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 4181 GLOVER ROAD

City ALMONT State MI Zip Code 48003

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C
Transaction ID : BD3AF0582E
Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 310.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REEDER, ANN, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 27826 NO. 60TH LANE

City PHOENIX State AZ Zip Code 85083

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB8B5E3B93

Amount of Each Disbursement this Period: 25.00

Memo Item

B. REEDER, ANN, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 27826 NO. 60TH LANE

City PHOENIX State AZ Zip Code 85083

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B11EA13CF3I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. REED, ROY, MICHAEL, ,

Full Name (Last, First, Middle Initial)

Mailing Address 4604 VIRGINIA AVE SE

City CHARLESTON State WV Zip Code 25304

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BDB3109A1C

Amount of Each Disbursement this Period: 17.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 67.50

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. REESE, SHIRLEY, A., ,

Full Name (Last, First, Middle Initial)

Mailing Address 414 MEADOW HILLS DR

City RICHLAND State WA Zip Code 99352

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B185B89BBE

Amount of Each Disbursement this Period: 25.00

Memo Item

B. REITKOPP, JO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3846 E. WOODBINE ROAD

City ORANGE State CA Zip Code 92867

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B54AD87CE7

Amount of Each Disbursement this Period: 35.00

Memo Item

C. RENNER, DEE, E., ,

Full Name (Last, First, Middle Initial)

Mailing Address 1420 MANCHESTER ST

City NATIONAL CITY State CA Zip Code 91950

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 26 / 2021

FEC Identification Number: C

Transaction ID : B12D9BFC27

Amount of Each Disbursement this Period: 75.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RENNER, DEE, E., ,

Full Name (Last, First, Middle Initial)

Mailing Address 1420 MANCHESTER ST

City NATIONAL CITY State CA Zip Code 91950

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 26 / 2021

FEC Identification Number: C

Transaction ID : B69D35420F

Amount of Each Disbursement this Period: 30.00

Memo Item

B. REPICI, FRANK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2832 S.SYDENHAM ST.

City PHILADELPHIA State PA Zip Code 19145

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B67AE82C2E

Amount of Each Disbursement this Period: 25.00

Memo Item

C. REW, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 102 SHAWNEE PLACE

City BUFFALO State NY Zip Code 14224

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B05C4219F4

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 155.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. REXROTH, PAUL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2077 CR 40		FEC Identification Number C [REDACTED] Transaction ID : BF2945B25E! Amount of Each Disbursement this Period 50.00	
City AUBURN	State IN	Zip Code 46706	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. REXROTH, PAUL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2077 CR 40		FEC Identification Number C [REDACTED] Transaction ID : B5EA1FD913! Amount of Each Disbursement this Period 50.00	
City AUBURN	State IN	Zip Code 46706	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. REXROTH, PAUL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2077 CR 40		FEC Identification Number C [REDACTED] Transaction ID : B7B2655DEI Amount of Each Disbursement this Period 50.00	
City AUBURN	State IN	Zip Code 46706	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes. 28a is checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form for entry A: REXROTH, PAUL. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form for entry B: RHOADES, FLOYD. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form for entry C: RICE, JOSEPH. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 350.00
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RICHARDSON, LARRY, , ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 1331 PICKET FENCE LANE			
City LINCOLN	State CA	Zip Code 95648	
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		
FEC Identification Number C _____		Transaction ID : B9FFF3A9D6	
Amount of Each Disbursement this Period _____		50.00	
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. RICKETTS, CHERYL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1961 W 63RD ST N			
City MUSKOGEE	State OK	Zip Code 74403	
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		
FEC Identification Number C _____		Transaction ID : BAB085B4E1	
Amount of Each Disbursement this Period _____		25.00	
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. RICKETTS, CHERYL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1961 W 63RD ST N			
City MUSKOGEE	State OK	Zip Code 74403	
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		
FEC Identification Number C _____		Transaction ID : B572F9812B	
Amount of Each Disbursement this Period _____		25.00	
<input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	_____	100.00
TOTAL This Period (last page this line number only).....▶	_____	_____

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RICKETTS, CHERYL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1961 W 63RD ST N		FEC Identification Number C [REDACTED] Transaction ID : B11BDF47BA	
City MUSKOGEE	State OK	Zip Code 74403	Amount of Each Disbursement this Period [REDACTED] 25.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. RIFF, JOHN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1089 COUNTY ROAD 455		FEC Identification Number C [REDACTED] Transaction ID : BDF358F393e	
City HONDO	State TX	Zip Code 78861	Amount of Each Disbursement this Period [REDACTED] 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. RIFF, JOHN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1089 COUNTY ROAD 455		FEC Identification Number C [REDACTED] Transaction ID : BF300B7E07	
City HONDO	State TX	Zip Code 78861	Amount of Each Disbursement this Period [REDACTED] 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 125.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIFF, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1089 COUNTY ROAD 455

City HONDO State TX Zip Code 78861

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B83ED5BEA

Amount of Each Disbursement this Period: 50.00

Memo Item

B. RINEY, STEVEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7207 N DRAKE CT

City PEORIA State IL Zip Code 61615

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B5C80D0174

Amount of Each Disbursement this Period: 50.00

Memo Item

C. RINGELSTETTER, DANIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7729 SHADY DR

City SUN PRAIRIE State WI Zip Code 53590

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B8237CDBC

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIOS, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1608 KIT CARSON WAY
B

City ROSEVILLE State CA Zip Code 95661

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C
Transaction ID : B410642D1B
Amount of Each Disbursement this Period: 25.00

Memo Item

B. RIOS, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1608 KIT CARSON WAY
B

City ROSEVILLE State CA Zip Code 95661

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C
Transaction ID : B3939216C9C
Amount of Each Disbursement this Period: 25.00

Memo Item

C. RITTER, CHARKES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11631 KNIGHTSBRIDGE PLACE

City LAKE WORTH State FL Zip Code 33449

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C
Transaction ID : BE057BFF6A
Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RITTER, CHARKES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11631 KNIGHTSBRIDGE PLACE

City LAKE WORTH State FL Zip Code 33449

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B77524A951f

Amount of Each Disbursement this Period: 100.00

Memo Item

B. RITTER, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11631 KNIGHTSBRIDGE PLACE

City LAKE WORTH State FL Zip Code 33449

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BA548F7B3D

Amount of Each Disbursement this Period: 100.00

Memo Item

C. RITTER, CHARLES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11631 KNIGHTSBRIDGE PLACE

City LAKE WORTH State FL Zip Code 33449

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BDA1D9928f

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RITTER, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 11631 KNIGHTSBRIDGE PLACE		FEC Identification Number C [REDACTED] Transaction ID : B2A93E45CF Amount of Each Disbursement this Period [REDACTED] 35.00
City LAKE WORTH	State FL	Zip Code 33449
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RITTER, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 11631 KNIGHTSBRIDGE PLACE		FEC Identification Number C [REDACTED] Transaction ID : BF50F1059C5 Amount of Each Disbursement this Period [REDACTED] 100.00
City LAKE WORTH	State FL	Zip Code 33449
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. RITTER, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 11631 KNIGHTSBRIDGE PLACE		FEC Identification Number C [REDACTED] Transaction ID : B3CA458D5/ Amount of Each Disbursement this Period [REDACTED] 25.00
City LAKE WORTH	State FL	Zip Code 33449
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 160.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RITTER, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 11631 KNIGHTSBRIDGE PLACE		FEC Identification Number C [REDACTED] Transaction ID : BEAEFE81C4 Amount of Each Disbursement this Period [REDACTED] 100.00	
City LAKE WORTH	State FL	Zip Code 33449	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. RITTER, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 11631 KNIGHTSBRIDGE PLACE		FEC Identification Number C [REDACTED] Transaction ID : BD305898340 Amount of Each Disbursement this Period [REDACTED] 100.00	
City LAKE WORTH	State FL	Zip Code 33449	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. RITTER, CHARLES, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 11631 KNIGHTSBRIDGE PLACE		FEC Identification Number C [REDACTED] Transaction ID : BB10618FD3 Amount of Each Disbursement this Period [REDACTED] 100.00	
City LAKE WORTH	State FL	Zip Code 33449	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 300.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RIVERA, ARNALDO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 13 SEQUOIA WAY		FEC Identification Number C [REDACTED] Transaction ID : BDCEE0540E Amount of Each Disbursement this Period 15.00	
City KISSIMMEE	State FL	Zip Code 34758	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. RIVES, JOYCE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address P O BOX 60271		FEC Identification Number C [REDACTED] Transaction ID : BE526CCBFD Amount of Each Disbursement this Period 50.00	
City CORPUS CHRISTI	State TX	Zip Code 78466	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. RIVES, JOYCE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address P O BOX 60271		FEC Identification Number C [REDACTED] Transaction ID : B8F1012C15 Amount of Each Disbursement this Period 50.00	
City CORPUS CHRISTI	State TX	Zip Code 78466	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RIZZO, RAFFAELAMARIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1417 SADLER ROAD, SUITE 332

City FERNANDINA BEACH State FL Zip Code 32034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC62D0EF80

Amount of Each Disbursement this Period: 35.00

Memo Item

B. ROACH, DIANNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2607 CONCORD COURT

City MCKINNEY State TX Zip Code 75070

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B8F152A45A1

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ROACH, DIANNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2607 CONCORD COURT

City MCKINNEY State TX Zip Code 75070

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B24CC14C78

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROBERTS, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6259 NW 118TH STREET RD

City REDDICK State FL Zip Code 32686

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2021

FEC Identification Number: C

Transaction ID : **BD4E5D7372**

Amount of Each Disbursement this Period: 250.00

Memo Item

B. ROBERTSON, CARLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2113

City HAVRE State MT Zip Code 59501

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **B7921AE083C**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ROBERTSON, LEWIS, P, ,

Full Name (Last, First, Middle Initial)

Mailing Address 4801 MORNING

City AMARILLO State TX Zip Code 79108

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BE826A57FA**

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 290.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 28a is checked.

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: ROBERTSON, LEWIS, P, ,
Mailing Address 4801 MORNING
City AMARILLO, State TX, Zip Code 79108
Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
State: District:
Date of Disbursement: 02 / 24 / 2021
FEC Identification Number: C
Transaction ID: BBA5FD6B6f
Amount of Each Disbursement this Period: 15.00
Memo Item: []

Form B: ROBERTSON, LEWIS, P, ,
Mailing Address 4801 MORNING
City AMARILLO, State TX, Zip Code 79108
Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
State: District:
Date of Disbursement: 02 / 24 / 2021
FEC Identification Number: C
Transaction ID: B8B95F513BI
Amount of Each Disbursement this Period: 15.00
Memo Item: []

Form C: ROBILLARD, JOSEPH, L., MR.,
Mailing Address 10720 DUNKIRK LN N
City OSSEO, State MN, Zip Code 55369
Purpose of Disbursement CONTRIBUTION REFUND
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
State: District:
Date of Disbursement: 03 / 28 / 2021
FEC Identification Number: C
Transaction ID: B3981811A8I
Amount of Each Disbursement this Period: 100.00
Memo Item: []

SUBTOTAL of Disbursements This Page (optional)..... 130.00
TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ROCK, RON, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 479 S WINDSWEPT TRAIL		FEC Identification Number C [REDACTED]	
City POST FALLS	State ID ID	Zip Code 83854	Transaction ID : BD9AC9BC2
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. RODRIGUEZ, ALEXIS, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 305 REICHEL ROAD		FEC Identification Number C [REDACTED]	
City NEW MILFORD	State ID NJ	Zip Code 07646	Transaction ID : B5DD4484FC
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. RODRIGUEZ, ANGELA, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 4720 EVERLOU RD		FEC Identification Number C [REDACTED]	
City CEDAR RAPIDS	State ID IA	Zip Code 52404	Transaction ID : B02D5DAD1
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RODRIGUEZ, ANGELA, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4720 EVERLOU RD		FEC Identification Number C [REDACTED] Transaction ID : B5AA9B5D06 Amount of Each Disbursement this Period 35.00	
City CEDAR RAPIDS	State IA	Zip Code 52404	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. RODRIGUEZ, ANNETTE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2428 MONTE CARLO WAY 611		FEC Identification Number C [REDACTED] Transaction ID : B3B55E99A0! Amount of Each Disbursement this Period 50.00	
City FT WIRTH	State TX	Zip Code 76244	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. RODRIGUEZ, ANNETTE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2428 MONTE CARLO WAY 611		FEC Identification Number C [REDACTED] Transaction ID : BE19EF7C26 Amount of Each Disbursement this Period 50.00	
City FT WIRTH	State TX	Zip Code 76244	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RODRIGUEZ, ANNETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2428 MONTE CARLO WAY
611

City FT WIRTH State TX Zip Code 76244

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B1C1CAF852

Amount of Each Disbursement this Period: 50.00

Memo Item

B. RODRIGUEZ, ANNETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2428 MONTE CARLO WAY
611

City FT WIRTH State TX Zip Code 76244

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B084CAED4D

Amount of Each Disbursement this Period: 50.00

Memo Item

C. RODRIGUEZ-SAINS, RENE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5301 CHICAGO AVENUE
4103

City LUBBOCK State TX Zip Code 79414

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B4109A6269!

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROGERS, DEBBIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4307 CAPOBELLA

City ALISO VIEJO State CA Zip Code 92656

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B753E720787

Amount of Each Disbursement this Period: 5.00

Memo Item

B. ROGERS, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 352 WINDSOR WAY

City NORTH WALES State PA Zip Code 19454

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B3B503CA35I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ROGERS, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 352 WINDSOR WAY

City NORTH WALES State PA Zip Code 19454

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B94DEF24F2

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ROGERS, JAMES, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 352 WINDSOR WAY		FEC Identification Number C [REDACTED] Transaction ID : BE87DED05A Amount of Each Disbursement this Period [REDACTED] 25.00	
City NORTH WALES	State PA	Zip Code 19454	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ROGERS, JAMES, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 352 WINDSOR WAY		FEC Identification Number C [REDACTED] Transaction ID : BF9BFFFACE Amount of Each Disbursement this Period [REDACTED] 25.00	
City NORTH WALES	State PA	Zip Code 19454	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ROGERS, JAMES, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 352 WINDSOR WAY		FEC Identification Number C [REDACTED] Transaction ID : BFB8029B96 Amount of Each Disbursement this Period [REDACTED] 25.00	
City NORTH WALES	State PA	Zip Code 19454	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 75.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ROHN, DELBERT, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 1527 POPLAR ST.		FEC Identification Number C [REDACTED] Transaction ID : B653D5E3A1 Amount of Each Disbursement this Period 35.00	
City CLARKSTON	State WA	Zip Code 99403	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ROHN, DELBERT, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 1527 POPLAR ST.		FEC Identification Number C [REDACTED] Transaction ID : BE27C1AFEC Amount of Each Disbursement this Period 35.00	
City CLARKSTON	State WA	Zip Code 99403	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ROHN, DELBERT, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 1527 POPLAR ST.		FEC Identification Number C [REDACTED] Transaction ID : B401816DEA Amount of Each Disbursement this Period 35.00	
City CLARKSTON	State WA	Zip Code 99403	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ROLLAND, MARTHA, SUHR, ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 4801 BONITA BAY BLVD APT 1003		FEC Identification Number C [REDACTED] Transaction ID : B996753572E Amount of Each Disbursement this Period 35.00	
City BONITA SPRINGS	State FL	Zip Code 34134	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. ROLLAND, MARTHA, SUHR, ,		Date of Disbursement MM / DD / YYYY 04 / 08 / 2021	
Mailing Address 4801 BONITA BAY BLVD APT 1003		FEC Identification Number C [REDACTED] Transaction ID : BEA9F1690B Amount of Each Disbursement this Period 35.00	
City BONITA SPRINGS	State FL	Zip Code 34134	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ROLLAND, MARTHA, SUHR, ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4801 BONITA BAY BLVD APT 1003		FEC Identification Number C [REDACTED] Transaction ID : B3B2C97D53 Amount of Each Disbursement this Period 35.00	
City BONITA SPRINGS	State FL	Zip Code 34134	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.00
[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROMINSKE, JARROD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23745 SLEEPY CIRCLE

City CHUGIAK State AK Zip Code 99567

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : B4D45B8666

Amount of Each Disbursement this Period: 35.00

Memo Item

B. ROMINSKE, JARROD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23745 SLEEPY CIRCLE

City CHUGIAK State AK Zip Code 99567

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B30AD2641A

Amount of Each Disbursement this Period: 35.00

Memo Item

C. ROSSINI, EDITH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 921 ARDMORE TRL

City HOSCHTON State GA Zip Code 30548

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B98ADB5AF

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 80.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROTH, DOUGLAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 414 11TH AVE

City SIBLEY State IA Zip Code 51249

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BCBAF99C1

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ROTH, DOUGLAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 414 11TH AVE

City SIBLEY State IA Zip Code 51249

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BF13D9997B1

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ROTH, DOUGLAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 414 11TH AVE

City SIBLEY State IA Zip Code 51249

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B06032133B1

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ROURKE, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 33772 TRILLIUM COURT

City LIVONIA State MI Zip Code 48150

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B2F5153FE8

Amount of Each Disbursement this Period: 15.00

Memo Item

B. ROZANSKI, JERZY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 44374 ROCK COVE TER 103

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : BE99D1040E1

Amount of Each Disbursement this Period: 35.00

Memo Item

C. ROZANSKI, JERZY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 44374 ROCK COVE TER 103

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2021

FEC Identification Number: C

Transaction ID : B8CA6BD50

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RUBENS, EFIN, , ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2021
Mailing Address 2883 WEST 12 STREET APT.15F		FEC Identification Number C [REDACTED] Transaction ID : BA420ADD0/ Amount of Each Disbursement this Period 50.00
City BROOKLYN	State NY	Zip Code 11224
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RUBENS, EFIN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 2883 WEST 12 STREET APT.15F		FEC Identification Number C [REDACTED] Transaction ID : BEA5DBA808 Amount of Each Disbursement this Period 50.00
City BROOKLYN	State NY	Zip Code 11224
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. RUCK, DAVID, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 12705 E203RD ST		FEC Identification Number C [REDACTED] Transaction ID : B598DF2690 Amount of Each Disbursement this Period 15.00
City RAYMORE	State MO	Zip Code 64083
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

115.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RUCK, DAVID, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 12705 E203RD ST		FEC Identification Number C [REDACTED] Transaction ID : BED3C1475E Amount of Each Disbursement this Period 15.00	
City RAYMORE	State MO	Zip Code 64083	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. RUHLMAN, JAMES, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 374GOLFVIEW DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BDB477774D Amount of Each Disbursement this Period 35.00	
City MIRAMAR BEACH	State FL	Zip Code 32550	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. RUNGE, MARSHA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5197 N 500 E ROAD		FEC Identification Number C [REDACTED] Transaction ID : BD1BB2C23 Amount of Each Disbursement this Period 35.00	
City MC LEAN	State IL	Zip Code 61754	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. RUNGE, MARSHA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5197 N 500 E ROAD		FEC Identification Number C [REDACTED] Transaction ID : B6E537F174f Amount of Each Disbursement this Period [REDACTED] 35.00	
City MC LEAN	State IL	Zip Code 61754	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. RUNGE, MARSHA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5197 N 500 E ROAD		FEC Identification Number C [REDACTED] Transaction ID : B1B1FDB56B Amount of Each Disbursement this Period [REDACTED] 35.00	
City MC LEAN	State IL	Zip Code 61754	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. RUNGE, MARSHA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5197 N 500 E ROAD		FEC Identification Number C [REDACTED] Transaction ID : B149DD24F9 Amount of Each Disbursement this Period [REDACTED] 35.00	
City MC LEAN	State IL	Zip Code 61754	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUSSELL, ZELDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8328 BOCOWOOD DR

City DALLAS State TX Zip Code 75228

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B479E22C64/

Amount of Each Disbursement this Period: 35.00

Memo Item

B. RUTZ, ROY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 20252 THUNDER RD W

City COLORADO SPRINGS State CO Zip Code 80908

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B78B31A6A0/

Amount of Each Disbursement this Period: 50.00

Memo Item

C. RUTZ, ROY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 20252 THUNDER RD W

City COLORADO SPRINGS State CO Zip Code 80908

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B533D9A0F2/

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. RUTZ, ROY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 20252 THUNDER RD W

City COLORADO SPRINGS State CO Zip Code 80908

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BB47BD7036**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. RUZICKA, TIM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2172 EDWARD'S RD

City GROVE CITY State OH Zip Code 43123

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B6598D56B1!**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. RYBERT, JEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 145 WOODCHASE COURT

City ATLANTA State GA Zip Code 30319

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BF4FDE6544**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SAMUELSON, CAROL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5050 , FOREST HILL DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BE48BBDFCI Amount of Each Disbursement this Period 15.00	
City MONROE	State GA	Zip Code 30655	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. SANCHEZ, RUBEN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1519 KIRKWOOD AVE		FEC Identification Number C [REDACTED] Transaction ID : BED6AAD122 Amount of Each Disbursement this Period 75.00	
City BAKERSFIELD	State CA	Zip Code 93307	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. SANCHEZ, RUBEN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1519 KIRKWOOD AVE		FEC Identification Number C [REDACTED] Transaction ID : B95EC1510A Amount of Each Disbursement this Period 75.00	
City BAKERSFIELD	State CA	Zip Code 93307	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SANDERS, BRYAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2225 KILLARNEY CT.		FEC Identification Number C [REDACTED] Transaction ID : B21B942238f Amount of Each Disbursement this Period [REDACTED] 100.00	
City LAWRENCE	State KS	Zip Code 66047	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. SANDERS, BRYAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2225 KILLARNEY CT.		FEC Identification Number C [REDACTED] Transaction ID : B4E81CDA7E Amount of Each Disbursement this Period [REDACTED] 35.00	
City LAWRENCE	State KS	Zip Code 66047	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SANGER, WALLACE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 15900 MEADOW WOOD DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BD15FAFD7? Amount of Each Disbursement this Period [REDACTED] 50.00	
City VLG WELLINGTN	State FL	Zip Code 33414	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 185.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SANTANA, PETER, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 340 CURACO STREET		FEC Identification Number C [REDACTED] Transaction ID : BCE09344E2 Amount of Each Disbursement this Period [REDACTED] 35.00	
City TOMS RIVER	State NJ	Zip Code 08757	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. SANTANA, PETER, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 340 CURACO STREET		FEC Identification Number C [REDACTED] Transaction ID : B34E165C7C Amount of Each Disbursement this Period [REDACTED] 35.00	
City TOMS RIVER	State NJ	Zip Code 08757	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. SANTANA, PETER, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 340 CURACO STREET		FEC Identification Number C [REDACTED] Transaction ID : BC25934173 Amount of Each Disbursement this Period [REDACTED] 35.00	
City TOMS RIVER	State NJ	Zip Code 08757	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAPP, JEANETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1902 BAY CREST

City SANTA ANA State CA Zip Code 92704

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : B9AE51F0ED

Amount of Each Disbursement this Period: 15.00

Memo Item

B. SARAY, SOVANNY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6351 WILLOWFIELD WAY

City SPRINGFIELD State VA Zip Code 22150

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BE8F09041FF

Amount of Each Disbursement this Period: 5.00

Memo Item

C. SARAY, SOVANNY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6351 WILLOWFIELD WAY

City SPRINGFIELD State VA Zip Code 22150

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BEBC6E6275

Amount of Each Disbursement this Period: 153.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 173.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SAUL, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O.BOX 1955

City LEHIGH ACRES State FL Zip Code 33970

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B621DCF163

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SAWYER, WALTER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1024 SW DI LIDO LANE

City PORT SAINT LUCIE State FL Zip Code 34953

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B34168AD007

Amount of Each Disbursement this Period: 25.00

Memo Item

C. SAWYER, WALTER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1024 SW DI LIDO LANE

City PORT SAINT LUCIE State FL Zip Code 34953

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BFF093A1B5

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SCHAEFER, BONITA, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 680 LOYOLA DR		FEC Identification Number C [REDACTED] Transaction ID : B3B8452000I Amount of Each Disbursement this Period 40.00	
City FLORISSANT	State MO	Zip Code 63031	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. SCHAUB, CAROL, , ,		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021	
Mailing Address 108 EAST 15TH STREET		FEC Identification Number C [REDACTED] Transaction ID : BD390A1F9B: Amount of Each Disbursement this Period 15.00	
City NEILLSVILLE	State WI	Zip Code 54456	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. SCHELLENBACH, LISA, , ,		Date of Disbursement MM / DD / YYYY 02 / 16 / 2021	
Mailing Address 3515 DOWNING AVE		FEC Identification Number C [REDACTED] Transaction ID : B50E2FA9E1 Amount of Each Disbursement this Period 35.00	
City GLENDALE	State CA	Zip Code 91208	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SCHELLENBACH, LISA, , ,		Date of Disbursement MM / DD / YYYY 02 / 16 / 2021	
Mailing Address 3515 DOWNING AVE		FEC Identification Number C [REDACTED]	
City GLENDALE	State CA	Zip Code 91208	Transaction ID : BF7BDACF1C
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. SCHLESINGER, EDITH, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 1025 PENINSULA AVE		FEC Identification Number C [REDACTED]	
City SAN MATEO	State CA	Zip Code 94401	Transaction ID : B47A2B317F4
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 45.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SCHLESINGER, EDITH, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 1025 PENINSULA AVE		FEC Identification Number C [REDACTED]	
City SAN MATEO	State CA	Zip Code 94401	Transaction ID : B9C257E80E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 45.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)
A. SCHNECK, PATRICIA, , ,

Mailing Address 208 DWIGHT PLACE

City BRICK State NJ Zip Code 08724

Purpose of Disbursement
CONTRIBUTION REFUND

010

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2021

FEC Identification Number

C
Transaction ID : B5E12A56E4
Amount of Each Disbursement this Period
35.00

Memo Item

Full Name (Last, First, Middle Initial)
B. SCHULZ, IRENE, , ,

Mailing Address 20385 W 51ST ST

City SAND SPRINGS State OK Zip Code 74063

Purpose of Disbursement
CONTRIBUTION REFUND

010

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2021

FEC Identification Number

C
Transaction ID : BF1F548DFB1
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. SCIARRINO, ANNA, , ,

Mailing Address 6046 PONCA CT

City SAN DIEGO State CA Zip Code 92120

Purpose of Disbursement
CONTRIBUTION REFUND

010

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2021

FEC Identification Number

C
Transaction ID : B8C972E73C
Amount of Each Disbursement this Period
15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCIARRINO, ANNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6046 PONCA CT

City SAN DIEGO State CA Zip Code 92120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BBF9063621**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. SCOTT, OLGA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9312 70TH AVENUE

City FOREST HILLS State NY Zip Code 11375

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BFDE601D1D**

Amount of Each Disbursement this Period: 12.50

Memo Item

C. SCRIBNER, BOB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4600 APPLEWOOD DR

City ODESSA State TX Zip Code 79761

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **B0EFB6C441**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 52.50

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SCUZZESE, BETTY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 75 HONEYFLOWER DRIVE

City TRENTON State NJ Zip Code 08620

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B550FC6F02

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SEBETKA, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3801 ANTELOPE TRAIL NE

City CEDAR RAPIDS State IA Zip Code 52402

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : BBF8EF2FD2

Amount of Each Disbursement this Period: 25.00

Memo Item

C. SEBETKA, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3801 ANTELOPE TRAIL NE

City CEDAR RAPIDS State IA Zip Code 52402

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : BA6B61E549

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SEBETKA, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3801 ANTELOPE TRAIL NE

City CEDAR RAPIDS State IA Zip Code 52402

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : **BBB856018B**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. SEBETKA, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3801 ANTELOPE TRAIL NE

City CEDAR RAPIDS State IA Zip Code 52402

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2021

FEC Identification Number: C

Transaction ID : **B0F0A723607**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. SEGAL, EMMELLE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 400 SO. OCEAN BLVD
26

City BOCA RATON State FL Zip Code 33432-6404

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BD042D7BCI**

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SEGRESS, BARBARA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 8937 GRISOM WAY		FEC Identification Number C [REDACTED]	
City RENO	State NV	Zip Code 89506	Transaction ID : BF3B0441F4
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. SEGRESS, BARBARA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 8937 GRISOM WAY		FEC Identification Number C [REDACTED]	
City RENO	State NV	Zip Code 89506	Transaction ID : B8FB0582FE
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 50.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SEGRETI, JOAN, M, ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 8210 STONE TRAIL DRIVE		FEC Identification Number C [REDACTED]	
City BETHESDA	State MD	Zip Code 20817	Transaction ID : BAC2B0287F
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SELLS, EDWIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 TOWN CRIER CT

City MOBILE State AL Zip Code 36608

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B61F05A26C

Amount of Each Disbursement this Period: 25.00

Memo Item

B. SELLS, EDWIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 TOWN CRIER CT

City MOBILE State AL Zip Code 36608

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BB43342AA8

Amount of Each Disbursement this Period: 25.00

Memo Item

C. SELLS, EDWIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 TOWN CRIER CT

City MOBILE State AL Zip Code 36608

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B7C587815B

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SELLS, EDWIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 TOWN CRIER CT

City MOBILE State AL Zip Code 36608

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B00594BBE8

Amount of Each Disbursement this Period: 25.00

Memo Item

B. SEPT, WALLACE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 8602

City MISSOULA State MT Zip Code 59807

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2021

FEC Identification Number: C

Transaction ID : B9930347974

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. SERIDGE, CAROL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 21428 JUEGO CIRCLE APT. 9C

City BOCA RATON State NY Zip Code 33433

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B7128FE5D5

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1035.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SEWARD, WALTER, , ,		Date of Disbursement MM / DD / YYYY 01 / 19 / 2021
Mailing Address 1919 WILLOWGREEN DR		FEC Identification Number C [REDACTED] Transaction ID : BA8BF8CB3C Amount of Each Disbursement this Period [REDACTED] 500.00
City DAYTON	State OH	Zip Code 45432
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. SHADRICK, IRIS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 50 OGDEN ST		FEC Identification Number C [REDACTED] Transaction ID : B37A07C8AA Amount of Each Disbursement this Period [REDACTED] 200.00
City JEKYLL ISLAND	State GA	Zip Code 31527
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. SHADRICK, IRIS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 50 OGDEN ST		FEC Identification Number C [REDACTED] Transaction ID : B7D71A79B3 Amount of Each Disbursement this Period [REDACTED] 200.00
City JEKYLL ISLAND	State GA	Zip Code 31527
Purpose of Disbursement CONTRIBUTION REFUND		<input type="checkbox"/> 010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 900.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHADRICK, IRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 50 OGDEN ST

City JEKYLL ISLAND State GA Zip Code 31527

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B80D22F451t

Amount of Each Disbursement this Period: 200.00

Memo Item

B. SHADRICK, IRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 50 OGDEN ST

City JEKYLL ISLAND State GA Zip Code 31527

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B99880002A8

Amount of Each Disbursement this Period: 200.00

Memo Item

C. SHAVER, STEPHEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1895 W EL MONTE PL

City CHANDLER State AZ Zip Code 85224

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BB4480915C

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 425.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHEPARD, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2177 BUFORD DAM ROAD

City BUFORD State GA Zip Code 30518

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B9CD7BFF92

Amount of Each Disbursement this Period: 250.00

Memo Item

B. SHEPARD, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2177 BUFORD DAM ROAD

City BUFORD State GA Zip Code 30518

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B650EAC8A7

Amount of Each Disbursement this Period: 250.00

Memo Item

C. SHEPARD, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2177 BUFORD DAM ROAD

City BUFORD State GA Zip Code 30518

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B9B82402F3

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SHEPARD, JAMES, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 2177 BUFORD DAM ROAD		FEC Identification Number C [REDACTED] Transaction ID : BB8D87E3CC Amount of Each Disbursement this Period [REDACTED] 250.00
City BUFORD	State GA	Zip Code 30518
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SHERMAN, SUSAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 659 WEST 5TH STREET		FEC Identification Number C [REDACTED] Transaction ID : B131B5F3E9F Amount of Each Disbursement this Period [REDACTED] 35.00
City MOUNT CARMEL	State PA	Zip Code 17851
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SHERWOOD, TERESA, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 4275 E BEAVER VISTA RD		FEC Identification Number C [REDACTED] Transaction ID : B1011C0C9E Amount of Each Disbursement this Period [REDACTED] 35.00
City RIMROCK	State AZ	Zip Code 86335
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 320.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SHIPP, B VICTORIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5075 OLD TRAVELLER LANE

City MECHANICSVILLE State VA Zip Code 23111

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B3F689914B1

Amount of Each Disbursement this Period: 500

Memo Item

B. SHOULTZ, FRANNY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15042 SENDERO LN

City WOODWAY State TX Zip Code 76712

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB6C6A66F5

Amount of Each Disbursement this Period: 100.00

Memo Item

C. SHUFFLER, BETTY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16477 FAIRGREEN AVENUE

City LAKEVILLE State MN Zip Code 55044

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BB6D184BA

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 155.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SHUFFLER, BETTY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 16477 FAIRGREEN AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BA88FD45D8 Amount of Each Disbursement this Period [REDACTED] 50.00
City LAKEVILLE	State MN	Zip Code 55044
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. SHUMWAY, SUZIE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 534 CUSTER ST		FEC Identification Number C [REDACTED] Transaction ID : B2CCFA8DE2 Amount of Each Disbursement this Period [REDACTED] 25.00
City DICKINSON	State ND	Zip Code 58601
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. SICLARE, CROSS, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 2843 W TILGHMAN ST		FEC Identification Number C [REDACTED] Transaction ID : B934EA2CA: Amount of Each Disbursement this Period [REDACTED] 15.00
City ALLENTOWN	State PA	Zip Code 18104
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 90.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIEVERS, DIANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1633 LAMONTE

City HOUSTON State TX Zip Code 77018

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B8BBEB6700

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SIEVERS, DIANNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1633 LAMONTE

City HOUSTON State TX Zip Code 77018

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BB793ACD51

Amount of Each Disbursement this Period: 50.00

Memo Item

C. SIFERS, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 47 MOORES WAY

City YOUNGSVILLE State NC Zip Code 27596

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B69B8EF8D7

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SILLS-PUGH, BRENDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2406 GREEN GINGER CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B9ACE37481! Amount of Each Disbursement this Period 5.00	
City ACCOKEEK	State MD	Zip Code 20607	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. SILMAN, JAY, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2021	
Mailing Address 24 BENNETT AVE 1B		FEC Identification Number C [REDACTED] Transaction ID : BB375ECCE8 Amount of Each Disbursement this Period 50.00	
City NEW YORK	State NY	Zip Code 10033	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SIMMONS, GALE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2085 N TUWEAP DRIVE, UNIT 64		FEC Identification Number C [REDACTED] Transaction ID : B8EC12FBF4 Amount of Each Disbursement this Period 25.00	
City SAINT GEORGE	State UT	Zip Code 84770	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SIMPSON, KATHERINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 219 BLANTON HILL RD.

City WHITEWRIGHT State TX Zip Code 75491

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : BED8F57B38

Amount of Each Disbursement this Period: 100.00

Memo Item

B. SINAGRA, THOMAS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1523 SOUTH WALKER AVE

City PALOS VERDES State CA Zip Code 90731

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B6C75CED0C

Amount of Each Disbursement this Period: 5.00

Memo Item

C. SIROIS, BOB, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 104 WHITE OAK DR

City HARWINTON State CT Zip Code 06791

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : BBEF957DD,

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

140.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, BRENDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3481

City MILTON State FL Zip Code 32572

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **BD84B30EFC**

Amount of Each Disbursement this Period: 15.00

Memo Item

B. SMITH, BRENDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3481

City MILTON State FL Zip Code 32572

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B5376E4AE9!**

Amount of Each Disbursement this Period: 15.00

Memo Item

C. SMITH, BRENDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3481

City MILTON State FL Zip Code 32572

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : **B8F3D75C97**

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SMITH, BRENDA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address PO BOX 3481		FEC Identification Number C [REDACTED] Transaction ID : B100BA710E Amount of Each Disbursement this Period 15.00	
City MILTON	State FL	Zip Code 32572	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. SMITH, BRENDA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address PO BOX 3481		FEC Identification Number C [REDACTED] Transaction ID : B74FF2DE6A Amount of Each Disbursement this Period 15.00	
City MILTON	State FL	Zip Code 32572	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. SMITH, BRENDA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address PO BOX 3481		FEC Identification Number C [REDACTED] Transaction ID : B6E531F63F Amount of Each Disbursement this Period 15.00	
City MILTON	State FL	Zip Code 32572	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

45.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SMITH, JUDITH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 600 CHESTNUT STREET
406C

City SAN FRANCISCO State CA Zip Code 94133

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BA3CE3D14C

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SMITH, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3262 CHELTENHAM WAY

City MEDFORD State OR Zip Code 97504

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B895722A929

Amount of Each Disbursement this Period: 50.00

Memo Item

C. SMITH, REBECCA, W., ,

Full Name (Last, First, Middle Initial)

Mailing Address 3322 QUEEN PALM DR

City JACKSONVILLE BEACH State FL Zip Code 32250

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B0ABC881BI

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SMITHSON, DANIEL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 112 PETAL VILLAGE DR APT C2		FEC Identification Number C [REDACTED] Transaction ID : BC449FCB9C Amount of Each Disbursement this Period [REDACTED] 100.00
City PETAL	State MS	Zip Code 39465
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SMITHSON, DANIEL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 112 PETAL VILLAGE DR APT C2		FEC Identification Number C [REDACTED] Transaction ID : B79E44A2F3/ Amount of Each Disbursement this Period [REDACTED] 100.00
City PETAL	State MS	Zip Code 39465
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SMITH, SUZANNE, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 185 BURMONT ROAD		FEC Identification Number C [REDACTED] Transaction ID : B0DB7D82B/ Amount of Each Disbursement this Period [REDACTED] 50.00
City DREXEL HILL	State PA	Zip Code 19026
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 250.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes. 28a is checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form for A. SMREKAR, PATRICIA, , , including mailing address, city, purpose of disbursement, and amount of 100.00.

Form for B. SNOCK, DONALD, , , including mailing address, city, purpose of disbursement, and amount of 25.00.

Form for C. SNYDER, KATHY, , , including mailing address, city, purpose of disbursement, and amount of 35.00.

SUBTOTAL of Disbursements This Page (optional) 160.00
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOLFRONK, VACLAV, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3801 GLEN EAGLES DR

City SILVER SPRING State MD Zip Code 20906

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B620E25531F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SOLFRONK, VACLAV, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3801 GLEN EAGLES DR

City SILVER SPRING State MD Zip Code 20906

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B63059BDD0

Amount of Each Disbursement this Period: 50.00

Memo Item

C. SOLOSKY, PHILIP, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4015 RANCHO CENTRO NW

City ALBUQUERQUE State NM Zip Code 87120

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2021

FEC Identification Number: C

Transaction ID : B9C6AF3164

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

200.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SONEFF, TONI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4905 SETTLERS AVE

City CALDWELL State ID Zip Code 83607

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : B13D8C6852

Amount of Each Disbursement this Period: 5.00

Memo Item

B. SONEFF, TONI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4905 SETTLERS AVE

City CALDWELL State ID Zip Code 83607

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : BE274AB2AE

Amount of Each Disbursement this Period: 5.00

Memo Item

C. SORAH, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 892560

City TEMECULA State CA Zip Code 92589

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B02F1987B9

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SOUTH, JOHN, , CHAPLAIN,

Full Name (Last, First, Middle Initial)

Mailing Address 3338 E. BEHREND. DR

City PHOENIX State AZ Zip Code 85050

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2021

FEC Identification Number: C

Transaction ID : B617A88B12I

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SPEARS, WINFRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12006 HODGES GROVE LN.

City TOMBALL State TX Zip Code 77377

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B313E2397C5

Amount of Each Disbursement this Period: 35.00

Memo Item

C. SPECCHIALI, SABASTIAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17469 BELLETTO DRIVE

City MORGAN HILL State CA Zip Code 95037

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B03279DCDC

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SPENCER, KAREN, H, ,

Full Name (Last, First, Middle Initial)

Mailing Address 125 ROYAL LYTHAM

City JACKSON State MS Zip Code 39211

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B79FBD6DCI

Amount of Each Disbursement this Period: 25.00

Memo Item

B. SPIKER, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 15350 SOUTH 1225 ROAD

City STOCKTON State MO Zip Code 65785

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C

Transaction ID : B857C6C5E7I

Amount of Each Disbursement this Period: 20.00

Memo Item

C. SPINKS, ROY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10380 DUNN DRIVE

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BF6563BFE7

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SPINKS, ROY, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 10380 DUNN DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B94C9DE680 Amount of Each Disbursement this Period 50.00	
City BATON ROUGE	State LA	Zip Code 70810	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. SPREITZER, DANIEL, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 810 DAKOTA AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B3CD9A8175I Amount of Each Disbursement this Period 35.00	
City GLADSTONE	State MI	Zip Code 49837	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. SPROUSE, PETE, , ,		Date of Disbursement MM / DD / YYYY 04 / 29 / 2021	
Mailing Address 3730 SAINTS CT		FEC Identification Number C [REDACTED] Transaction ID : BA1FF2668D Amount of Each Disbursement this Period 100.00	
City COLORADO SPRINGS	State CO	Zip Code 80904	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STABEL, MARSHA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 977

City MENARD State TX Zip Code 76859

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2021

FEC Identification Number: C

Transaction ID : B30DD60021

Amount of Each Disbursement this Period: 35.00

Memo Item

B. STARLING, SCOTT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 944 BATTLEFIELD DR

City NASHVILLE State TN Zip Code 37204

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : B0BD933CF7

Amount of Each Disbursement this Period: 35.00

Memo Item

C. STARLING, SCOTT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 944 BATTLEFIELD DR

City NASHVILLE State TN Zip Code 37204

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2021

FEC Identification Number: C

Transaction ID : B614AC3EF7

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STEARNS, DAVE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 606 E GRANT

City SPEARFISH State SD Zip Code 57783

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B224D17575E

Amount of Each Disbursement this Period: 35.00

Memo Item

B. STEEVES, CELESTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 22456 FOUNTAIN LAKES BLVD

City ESTERO State FL Zip Code 33928

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 04 / 2021

FEC Identification Number: C

Transaction ID : B02C034793C

Amount of Each Disbursement this Period: 15.00

Memo Item

C. STEIN, DAVID L., , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 201690

City AUSTIN State TX Zip Code 78720

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B59D043F8E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. STEINER, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 120 HOLLY LN N		FEC Identification Number C [REDACTED] Transaction ID : B8794DE5CD Amount of Each Disbursement this Period [REDACTED] 35.00	
City PLYMOUTH	State MN	Zip Code 55447	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State:	District:		

Full Name (Last, First, Middle Initial) B. STEINER, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 120 HOLLY LN N		FEC Identification Number C [REDACTED] Transaction ID : BB5B464F781 Amount of Each Disbursement this Period [REDACTED] 35.00	
City PLYMOUTH	State MN	Zip Code 55447	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State:	District:		

Full Name (Last, First, Middle Initial) C. STEINER, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 120 HOLLY LN N		FEC Identification Number C [REDACTED] Transaction ID : BAD46ED0C Amount of Each Disbursement this Period [REDACTED] 35.00	
City PLYMOUTH	State MN	Zip Code 55447	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. STEINER, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 120 HOLLY LN N		FEC Identification Number C [REDACTED] Transaction ID : B7EFE138D9 Amount of Each Disbursement this Period [REDACTED] 250.00	
City MINNEAPOLIS	State MN	Zip Code 55447	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. STEINER, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 120 HOLLY LN N		FEC Identification Number C [REDACTED] Transaction ID : B24579EFE84 Amount of Each Disbursement this Period [REDACTED] 35.00	
City PLYMOUTH	State MN	Zip Code 55447	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. STEPP, JAMES, , ,		Date of Disbursement MM / DD / YYYY 01 / 20 / 2021	
Mailing Address 1261 7TH STREET		FEC Identification Number C [REDACTED] Transaction ID : BD7610603C Amount of Each Disbursement this Period [REDACTED] 5.00	
City ELKO	State NV	Zip Code 89801	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 290.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STEVENS, GREGORY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13651 BACKUS

City SOUTHGATE State MI Zip Code 48195

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : B73307C3C8

Amount of Each Disbursement this Period: 5.00

Memo Item

B. STEWART, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5521 TOWERS ST

City TORRANCE State CA Zip Code 90503

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B9F1602CCE

Amount of Each Disbursement this Period: 35.00

Memo Item

C. STEWART, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5521 TOWERS ST

City TORRANCE State CA Zip Code 90503

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B4D91F03C2

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. STEWART, CHRIS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 5521 TOWERS ST		FEC Identification Number C [REDACTED] Transaction ID : B834378D33f Amount of Each Disbursement this Period [REDACTED] 35.00	
City TORRANCE	State CA	Zip Code 90503	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. STEWART, CHRIS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 5521 TOWERS ST		FEC Identification Number C [REDACTED] Transaction ID : B8C309C4CB Amount of Each Disbursement this Period [REDACTED] 25.00	
City TORRANCE	State CA	Zip Code 90503	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. STEWART, CHRISTINE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 5521 TOWERS ST		FEC Identification Number C [REDACTED] Transaction ID : B2031D5DB3 Amount of Each Disbursement this Period [REDACTED] 25.00	
City TORRANCE	State CA	Zip Code 90503	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 85.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STEWART, CHRISTINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5521 TOWERS ST

City TORRANCE State CA Zip Code 90503

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B21B730986

Amount of Each Disbursement this Period: 25.00

Memo Item

B. STEWART, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 177 SPRUCE HILL DRIVE

City HENDERSONVILLE State NC Zip Code 28792

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B73DA20BF3

Amount of Each Disbursement this Period: 50.00

Memo Item

C. STEWART, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 177 SPRUCE HILL DRIVE

City HENDERSONVILLE State NC Zip Code 28792

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE03F82178

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. STEWART, PETER, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 2476 20TH AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BED4F03FC1 Amount of Each Disbursement this Period 5.00
City SAN FRANCISCO	State CA	Zip Code 94116
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. STILLIN, TERRENCE, , ,		Date of Disbursement MM / DD / YYYY 01 / 06 / 2021
Mailing Address 6420 N MANITOU TRL		FEC Identification Number C [REDACTED] Transaction ID : B11BBE5C43 Amount of Each Disbursement this Period 5.00
City NORTHPORT	State MI	Zip Code 49670
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. STOVER, PATRICIA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 19250 STATELINE RD R18		FEC Identification Number C [REDACTED] Transaction ID : BC0D7051E9 Amount of Each Disbursement this Period 35.00
City EDWARDSBURG	State MI	Zip Code 49112
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STRACENER, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1614 GLENHAVEN DR.

City MURFREESBORO State TN Zip Code 37130

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BBB30377E2**

Amount of Each Disbursement this Period: 10.00

Memo Item

B. STRADLING, RANDALL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1401 NE 71ST DRIVE

City VANCOUVER State WA Zip Code 98665

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B21350ACAB**

Amount of Each Disbursement this Period: 15.00

Memo Item

C. STRAUSS, PHILIP, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 813 GROVE STREET

City SAN FRANCISCO State CA Zip Code 94117

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BA708F3A17**

Amount of Each Disbursement this Period: 150.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. STRONG, SANDRA, R, ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 691 PALISADO AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B9922993548 Amount of Each Disbursement this Period [REDACTED] 35.00	
City WINDSOR	State CT	Zip Code 06095	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. STRONG, SANDRA, R, ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 691 PALISADO AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BB70D53C9F Amount of Each Disbursement this Period [REDACTED] 35.00	
City WINDSOR	State CT	Zip Code 06095	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. STRONG, SANDRA, R, ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 691 PALISADO AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B502E19714; Amount of Each Disbursement this Period [REDACTED] 35.00	
City WINDSOR	State CT	Zip Code 06095	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. STUBLEY-STOVALL, ELAINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 203 MICHAUX CT.

City GREENVILLE State SC Zip Code 29605

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B5C9261B78:

Amount of Each Disbursement this Period: 25.00

Memo Item

B. STUDZINSKI, URSZULA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5623 BURRELL

City WEST BLOOMFIELD State MI Zip Code 48322

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B8B6EB4381I

Amount of Each Disbursement this Period: 5.00

Memo Item

C. SUGGS, HARRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9510 SUGGS ROAD

City CLERMONT State FL Zip Code 34711

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BFE337623A

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SULLIVAN, DENNIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 34 DUGGAN ROAD

City ACTON State MA Zip Code 01720

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BEAB6D998C

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SULLIVAN, DENNIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 34 DUGGAN ROAD

City ACTON State MA Zip Code 01720

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B423D74FDD

Amount of Each Disbursement this Period: 50.00

Memo Item

C. SULLIVAN, KAYANA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17335 FARGOER WAY
TOWN OF ZUEHL

City MARION State TX Zip Code 78124

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B2782F1BDC

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SUSKEY, DOLORES, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 1070 DECKER LANE 9		FEC Identification Number C [REDACTED] Transaction ID : B79C7D2C46 Amount of Each Disbursement this Period 15.00
City WARMINSTER	State PA	Zip Code 18974-2415
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SUWANKOSAI, PUANGSRI, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 160 MAPLEWOOD O 14		FEC Identification Number C [REDACTED] Transaction ID : B44FDE732C: Amount of Each Disbursement this Period 27.00
City MAPLEWOOD	State NJ	Zip Code 07040
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. SWAGERTY, CARYN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address PO BOX 821		FEC Identification Number C [REDACTED] Transaction ID : BD790AE630 Amount of Each Disbursement this Period 10.00
City TRINIDAD	State CO	Zip Code 81082
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

52.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SWANSON, CAROLYN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4810 LAUREL LANE		FEC Identification Number C [REDACTED] Transaction ID : B946C0CD6D Amount of Each Disbursement this Period 25.00	
City FORT MYERS	State FL	Zip Code 33908	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. SWANSON, CAROLYN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 4810 LAUREL LANE		FEC Identification Number C [REDACTED] Transaction ID : BA36CBEE2 Amount of Each Disbursement this Period 50.00	
City FORT MYERS	State FL	Zip Code 33908	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. SWANSON, CAROLYN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4810 LAUREL LANE		FEC Identification Number C [REDACTED] Transaction ID : B8D0FE7962 Amount of Each Disbursement this Period 50.00	
City FORT MYERS	State FL	Zip Code 33908	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. SWANSON, COOKIE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4810 LAUREL LN		FEC Identification Number C [REDACTED] Transaction ID : BFCB8A445E Amount of Each Disbursement this Period 50.00	
City FORT MYERS	State FL	Zip Code 33908	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. SWANSON, COOKIE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 4810 LAUREL LN		FEC Identification Number C [REDACTED] Transaction ID : B9B8D1939B Amount of Each Disbursement this Period 50.00	
City FORT MYERS	State FL	Zip Code 33908	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SWANSON, COOKIE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 4810 LAUREL LN		FEC Identification Number C [REDACTED] Transaction ID : B30C191BBC Amount of Each Disbursement this Period 50.00	
City FORT MYERS	State FL	Zip Code 33908	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. SWEARINGEN, YANCEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17118 FAWN CROSSING DRIVE

City SAN ANTONIO State TX Zip Code 78248

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE8C6BD376

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SZOMBATHY, MURIEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3408 W EL CAMPO GRANDE AVE

City NORTH LAS VEGAS State NV Zip Code 89031

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC70C3BF83

Amount of Each Disbursement this Period: 25.00

Memo Item

C. SZYMANSKI, GREG, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4726 SEASTAR VISTA

City DESTIN State FL Zip Code 32541

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BEB10C4128

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

125.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TAMEZ, RON, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 3353 SILVER RAPIDS		FEC Identification Number C [REDACTED]
City VALLEY SPRINGS	State CA	Zip Code 95252
Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010	Transaction ID : B69A63948A Amount of Each Disbursement this Period 25.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. TAMEZ, RON, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 3353 SILVER RAPIDS		FEC Identification Number C [REDACTED]
City VALLEY SPRINGS	State CA	Zip Code 95252
Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010	Transaction ID : B8545EE4E47 Amount of Each Disbursement this Period 25.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. TAN, GEORGE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 132 CASUDA CANYON DRIVE B		FEC Identification Number C [REDACTED]
City MONTEREY PARK	State CA	Zip Code 91754
Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010	Transaction ID : B6B2D5DFE1 Amount of Each Disbursement this Period 15.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

65.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TANGO, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 3 JOHN ST		FEC Identification Number C [REDACTED] Transaction ID : BCE2CF7B63 Amount of Each Disbursement this Period 100.00	
City FAIRFIELD	State NJ	Zip Code 07004	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. TAYLOR, DIANE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 5507 WATTSBURG RD		FEC Identification Number C [REDACTED] Transaction ID : B9281465379 Amount of Each Disbursement this Period 100.00	
City ERIE	State PA	Zip Code 16509	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. TAYLOR, KENNETH, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2470 HICKORY STATION CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B82EAFFC5/ Amount of Each Disbursement this Period 35.00	
City SNELLVILLE	State GA	Zip Code 30078	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	235.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TAYLOR, KENNETH, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 2470 HICKORY STATION CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B3CBE69BC! Amount of Each Disbursement this Period 35.00	
City SNELLVILLE	State GA	Zip Code 30078	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. TAYLOR, KENNETH, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2470 HICKORY STATION CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B8A7D54A53! Amount of Each Disbursement this Period 35.00	
City SNELLVILLE	State GA	Zip Code 30078	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. TAYLOR, SANDRA, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 8580 THOMAS DR.		FEC Identification Number C [REDACTED] Transaction ID : BCB61B8021 Amount of Each Disbursement this Period 35.00	
City ORANGE	State TX	Zip Code 77630	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TAYLOR, SANDRA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8580 THOMAS DR.		FEC Identification Number C [REDACTED] Transaction ID : B0C0244C06 Amount of Each Disbursement this Period [REDACTED] 35.00	
City ORANGE	State TX	Zip Code 77630	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. TEMPLETON, RHONDA, , ,		Date of Disbursement MM / DD / YYYY 03 / 19 / 2021	
Mailing Address 1299 BRIDGE AVENUE		FEC Identification Number C [REDACTED] Transaction ID : B485CE1AF6 Amount of Each Disbursement this Period [REDACTED] 25.00	
City GALESBURG	State IL	Zip Code 61401	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. TEMPLETON, RHONDA, , ,		Date of Disbursement MM / DD / YYYY 03 / 19 / 2021	
Mailing Address 1299 BRIDGE AVENUE		FEC Identification Number C [REDACTED] Transaction ID : BC65CA4CD Amount of Each Disbursement this Period [REDACTED] 25.00	
City GALESBURG	State IL	Zip Code 61401	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 85.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B70A0BC925

Amount of Each Disbursement this Period: 50.00

Memo Item

B. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC194EDAA4

Amount of Each Disbursement this Period: 15.00

Memo Item

C. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B712BB0EFC

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 115.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BCADE0DAE**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BF2DEED9CE**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BE3357AC0E**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : BCB264B347	
City DUNDALK	State MD	Zip Code 21222	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B0BEBE7344	
City DUNDALK	State MD	Zip Code 21222	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : BC5A160AE	
City DUNDALK	State MD	Zip Code 21222	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

115.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : BB0DA2CF1C Amount of Each Disbursement this Period 15.00	
City DUNDALK	State MD	Zip Code 21222	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B2F0F7542FE Amount of Each Disbursement this Period 15.00	
City DUNDALK	State MD	Zip Code 21222	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B48B0FA14C Amount of Each Disbursement this Period 35.00	
City DUNDALK	State MD	Zip Code 21222	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B343DCA1AE

Amount of Each Disbursement this Period: 50.00

Memo Item

B. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B60C4EBED1

Amount of Each Disbursement this Period: 50.00

Memo Item

C. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B9AE057F4C

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC31D54960I

Amount of Each Disbursement this Period: 15.00

Memo Item

B. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2DBA9C493

Amount of Each Disbursement this Period: 50.00

Memo Item

C. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BECF503E13

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

80.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : BC722E9A82	
City DUNDALK	State MD	Zip Code 21222	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : B5CDF3A469	
City DUNDALK	State MD	Zip Code 21222	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. TERESI, MARIO, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 8330 BLETZER ROAD		FEC Identification Number C [REDACTED] Transaction ID : BCE41463B6	
City DUNDALK	State MD	Zip Code 21222	Amount of Each Disbursement this Period 15.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

80.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BC8B782224

Amount of Each Disbursement this Period: 35.00

Memo Item

B. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BDFC5FDFC8

Amount of Each Disbursement this Period: 35.00

Memo Item

C. TERESI, MARIO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 BLETZER ROAD

City DUNDALK State MD Zip Code 21222

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE07577BAF

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TESTAVERDE, SALVATORE, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 11 LAKERIDGE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B3A64ADF63 Amount of Each Disbursement this Period 100.00
City GEORGETOWN	State MA	Zip Code 01833
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TESTAVERDE, SALVATORE, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 11 LAKERIDGE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B0B54428FD4 Amount of Each Disbursement this Period 100.00
City GEORGETOWN	State MA	Zip Code 01833
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TESTAVERDE, SALVATORE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 11 LAKERIDGE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BFEEFAD351 Amount of Each Disbursement this Period 100.00
City GEORGETOWN	State MA	Zip Code 01833
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TESTAVERDE, SALVATORE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 11 LAKERIDGE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B889CEB6C
City GEORGETOWN	State MA	Zip Code 01833
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. THIBODEAU, RICHARD, , MR,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 19462 ROLLING HILLS CT		FEC Identification Number C [REDACTED] Transaction ID : B481A554993
City NORTH FORT MYERS	State FL	Zip Code 33903
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. THIBODEAUX, A.J., , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 19909 HWY. 90		FEC Identification Number C [REDACTED] Transaction ID : BE41A49E08
City CROWLEY	State LA	Zip Code 70526
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. THOMAS, MARYJEAN, , ,		Date of Disbursement MM / DD / YYYY 06 / 05 / 2021
Mailing Address 235 CASTLE CREEK DR		FEC Identification Number C [REDACTED] Transaction ID : B79A9DAC97 Amount of Each Disbursement this Period [REDACTED] 600.00
City WAYNESVILLE	State NC	Zip Code 28786
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. THOMPSON, WAYNE, , ,		Date of Disbursement MM / DD / YYYY 02 / 25 / 2021
Mailing Address 18 GLAD TIDINGS RD		FEC Identification Number C [REDACTED] Transaction ID : B49388E8EA Amount of Each Disbursement this Period [REDACTED] 35.00
City LUGOFF	State SC	Zip Code 29078
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. THOMPSON, WAYNE, , ,		Date of Disbursement MM / DD / YYYY 02 / 25 / 2021
Mailing Address 18 GLAD TIDINGS RD		FEC Identification Number C [REDACTED] Transaction ID : B21480F23E Amount of Each Disbursement this Period [REDACTED] 35.00
City LUGOFF	State SC	Zip Code 29078
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 670.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. THORNTON, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1327 RIVER RUN CIRCLE

City SEVIERVILLE State TN Zip Code 37876

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 16 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B23C8A43C1

Amount of Each Disbursement this Period: 15.00

Memo Item

B. THORP, JEANINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 18503 KINGS ROW

City HOUSTON State TX Zip Code 77058

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B2AB05E458

Amount of Each Disbursement this Period: 10.00

Memo Item

C. THURLKILL, REX, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 119 PERCY LANE

City EL DORADO State AR Zip Code 71730

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BBE7F67C6E

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TIDWELL, BILLIE, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 1109 ALBANY DR

City FORT WORTH State TX Zip Code 76131

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2021

FEC Identification Number: C

Transaction ID : **BD86FCF40D**

Amount of Each Disbursement this Period: 20.00

Memo Item

B. TIDWELL, TOM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 196 GRAND OAK CIRCLE

City PENDLETON State SC Zip Code 29670

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : **B507B749D5I**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. TILLEY, JERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 19205 40TH AVE. WEST UNIT B-2

City LYNNWOOD State WA Zip Code 98036

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 22 / 2021

FEC Identification Number: C

Transaction ID : **B5363E9491I**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TILLEY, JERRY, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2021
Mailing Address 19205 40TH AVE. WEST UNIT B-2		FEC Identification Number C [REDACTED] Transaction ID : B8D562E15B Amount of Each Disbursement this Period 25.00
City LYNNWOOD	State WA	Zip Code 98036
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TISDALE, LAURINA, , ,		Date of Disbursement MM / DD / YYYY 03 / 04 / 2021
Mailing Address 9107 RIVERSHORE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B685D2D0DB Amount of Each Disbursement this Period 50.00
City NIAGARA FALLS	State NY	Zip Code 14304
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TISDALE, LAURINA, , ,		Date of Disbursement MM / DD / YYYY 03 / 04 / 2021
Mailing Address 9107 RIVERSHORE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BEBD9E1C4 Amount of Each Disbursement this Period 50.00
City NIAGARA FALLS	State NY	Zip Code 14304
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TOBIN, JON, , ,
Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address: 10 CARRIAGE ST

City: HONEOYE FALLS State: NY Zip Code: 14472

Purpose of Disbursement: CONTRIBUTION REFUND Category/Type

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : B938E49B3F
Amount of Each Disbursement this Period:
 Memo Item

B. TOBIN, JON, , ,
Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address: 10 CARRIAGE ST

City: HONEOYE FALLS State: NY Zip Code: 14472

Purpose of Disbursement: CONTRIBUTION REFUND Category/Type

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : B47CDA0977:
Amount of Each Disbursement this Period:
 Memo Item

C. TOBIN, JON, , ,
Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address: 10 CARRIAGE ST

City: HONEOYE FALLS State: NY Zip Code: 14472

Purpose of Disbursement: CONTRIBUTION REFUND Category/Type

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: _____
Transaction ID : B9AA105E21
Amount of Each Disbursement this Period:
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TODD, KENNETH, , ,		Date of Disbursement MM / DD / YYYY 01 / 04 / 2021
Mailing Address 1120 SOMERSET ROAD APARTMENT 207		FEC Identification Number C [REDACTED] Transaction ID : B9A1A20443I Amount of Each Disbursement this Period 50.00
City FERGUS FALLS	State MN	Zip Code 56537
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TORY, HORACE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 4970 GREENTREE TRAIL		FEC Identification Number C [REDACTED] Transaction ID : BC18B2E3B7 Amount of Each Disbursement this Period 35.00
City ATLANTA	State GA	Zip Code 30349
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TORY, HORACE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 4970 GREENTREE TRAIL		FEC Identification Number C [REDACTED] Transaction ID : B28111F4E0 Amount of Each Disbursement this Period 35.00
City ATLANTA	State GA	Zip Code 30349
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TRACEY, BILL, , , SR

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 59029

City POINT LAY State AK Zip Code 99759

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BC708029C3I

Amount of Each Disbursement this Period: 100.00

Memo Item

B. TRANTHAM, TED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11624 SOUTHERLAND

City DENTON State TX Zip Code 76207

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B502C7C8A4I

Amount of Each Disbursement this Period: 25.00

Memo Item

C. TRAVISANO, MICHELLE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 655 PEPPERBUSH DRIVE

City MYRTLE BEACH State SC Zip Code 29579

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B9899B002E

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TRAYLOR, CAROL, , ,		Date of Disbursement MM / DD / YYYY 03 / 22 / 2021
Mailing Address 3017 ROCKFORD FALLS DR S		FEC Identification Number C [REDACTED] Transaction ID : B84694E9328 Amount of Each Disbursement this Period 25.00
City JACKSONVILLE	State FL	Zip Code 32224
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. TRICHE, NIDA, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2021
Mailing Address 130 LEIGH LN		FEC Identification Number C [REDACTED] Transaction ID : BA958692238 Amount of Each Disbursement this Period 50.00
City LA PLACE	State LA	Zip Code 70068
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. TRIEU, SANG, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 1105 HAMAL 254		FEC Identification Number C [REDACTED] Transaction ID : B65BC5D983 Amount of Each Disbursement this Period 20.00
City IRVINE	State CA	Zip Code 92618
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TRIPATHY, ASHISH, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 503 POND GATE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B501A9620C Amount of Each Disbursement this Period 35.00
City BARRINGTON	State IL	Zip Code 60010
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TRIPATHY, ASHISH, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 503 POND GATE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : B14E8F183F0 Amount of Each Disbursement this Period 35.00
City BARRINGTON	State IL	Zip Code 60010
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TROTTER, SHIRLEY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 815 GRIFFITH COURT		FEC Identification Number C [REDACTED] Transaction ID : BDBE44DB0 Amount of Each Disbursement this Period 50.00
City DIXON	State CA	Zip Code 95620
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TROTTER, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 815 GRIFFITH COURT

City DIXON State CA Zip Code 95620

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BFEA75CC38

Amount of Each Disbursement this Period: 50.00

Memo Item

B. TROTTER, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 815 GRIFFITH COURT

City DIXON State CA Zip Code 95620

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BF3613281A3

Amount of Each Disbursement this Period: 50.00

Memo Item

C. TRUELL, DOROTHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 109 GATES CIR

City LEXINGTON State SC Zip Code 29072

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2021

FEC Identification Number: C

Transaction ID : BE98041662!

Amount of Each Disbursement this Period: 20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TRUNKENBOLZ, UNNA, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 1285 LAKEVIEW CT		FEC Identification Number C [REDACTED] Transaction ID : BD5F01F3D1 Amount of Each Disbursement this Period 15.00	
City BRIGHTON	State CO	Zip Code 80601	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. TUCKER, SIMON, , ,		Date of Disbursement MM / DD / YYYY 03 / 15 / 2021	
Mailing Address 73 BIG HORN LOOP APT 11		FEC Identification Number C [REDACTED] Transaction ID : B2ACB9CD5F Amount of Each Disbursement this Period 500.00	
City CROSSVILLE	State TN	Zip Code 38572	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. TUCKER, SIMON, , ,		Date of Disbursement MM / DD / YYYY 03 / 15 / 2021	
Mailing Address 73 BIG HORN LOOP APT 11		FEC Identification Number C [REDACTED] Transaction ID : B94DB4DD1: Amount of Each Disbursement this Period 500.00	
City CROSSVILLE	State TN	Zip Code 38572	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	1015.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. TURNER, STEVE, , ,		Date of Disbursement MM / DD / YYYY 04 / 19 / 2021	
Mailing Address 620 HWY. 104		FEC Identification Number C [REDACTED] Transaction ID : BD8710344D! Amount of Each Disbursement this Period 5.00	
City SALTILLO	State TN	Zip Code 38370	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. TURNER, STEVE, , ,		Date of Disbursement MM / DD / YYYY 04 / 19 / 2021	
Mailing Address 620 HWY. 104		FEC Identification Number C [REDACTED] Transaction ID : BE61ABB8D! Amount of Each Disbursement this Period 5.00	
City SALTILLO	State TN	Zip Code 38370	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. TUTRONE, DOMINICK, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 494 HENRY STREET 4		FEC Identification Number C [REDACTED] Transaction ID : B91FDC1EB! Amount of Each Disbursement this Period 35.00	
City BROOKLYN	State NY	Zip Code 11231	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. TUTRONE, DOMINICK, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 494 HENRY STREET
4

City BROOKLYN State NY Zip Code 11231

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : BDF085ADBf
Amount of Each Disbursement this Period: 35.00

Memo Item

B. ULLRICH, SANDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 339

City HASKELL State OK Zip Code 74436

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : B94AFA75C0
Amount of Each Disbursement this Period: 100.00

Memo Item

C. ULLRICH, SANDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 339

City HASKELL State OK Zip Code 74436

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C [REDACTED]
Transaction ID : BD6119DEDf
Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 235.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ULLRICH, SANDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 339

City HASKELL State OK Zip Code 74436

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BAA1146E4D

Amount of Each Disbursement this Period: 100.00

Memo Item

B. ULMER, DONNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 71 LAKEBRIDGE DRIVE

City WEST DEPTFORD State NJ Zip Code 08096

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BB099950348

Amount of Each Disbursement this Period: 25.00

Memo Item

C. UNDERWOOD, SOPHIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 317 GROVE STREET

City WELLESLEY State MA Zip Code 02482

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BB801D5CDI

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. UNDERWOOD, SOPHIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 317 GROVE STREET

City WELLESLEY State MA Zip Code 02482

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B74F3FB998

Amount of Each Disbursement this Period: 100.00

Memo Item

B. UNLAND, URSULA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3529 MALAGROTTA CIRCLE

City CAPE CORAL State FL Zip Code 33909

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B5E3643C368

Amount of Each Disbursement this Period: 35.00

Memo Item

C. UNLAND, URSULA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3529 MALAGROTTA CIRCLE

City CAPE CORAL State FL Zip Code 33909

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B89E0CC553

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 170.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. UNLAND, URSULA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3529 MALAGROTTA CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B9B4C99CB1 Amount of Each Disbursement this Period [REDACTED] 35.00	
City CAPE CORAL	State FL	Zip Code 33909	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. UNLAND, URSULA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 3529 MALAGROTTA CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : B35C83B98D1 Amount of Each Disbursement this Period [REDACTED] 35.00	
City CAPE CORAL	State FL	Zip Code 33909	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. VACCARO, LOUIS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1103 LAKESHORE DR		FEC Identification Number C [REDACTED] Transaction ID : B75EDE2DD1 Amount of Each Disbursement this Period [REDACTED] 5.00	
City JUPITER	State FL	Zip Code 33458	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 75.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. VACCARO, LOUIS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 1103 LAKESHORE DR		FEC Identification Number C [REDACTED] Transaction ID : B303BAC9E0	
City JUPITER	State FL	Zip Code 33458	Amount of Each Disbursement this Period 5.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. VALENCIA, GUILLERMO, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 1790, LEE JANZE DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BC92C92946I	
City KISSIMMEE	State FL	Zip Code 34744	Amount of Each Disbursement this Period 35.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. VALLELUNGA, DAVE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address P.O. BOX 1789		FEC Identification Number C [REDACTED] Transaction ID : BC8E2A7619	
City TWIN HARTE	State CA	Zip Code 95383	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. VAN BUSKIRK, MARY ANN, , ,		Date of Disbursement MM / DD / YYYY 02 / 16 / 2021	
Mailing Address 6955 GREENWATER CIR		FEC Identification Number C [REDACTED] Transaction ID : B0E30C1E61 Amount of Each Disbursement this Period 50.00	
City CASTLE ROCK	State CO	Zip Code 80108	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. VAN BUSKIRK, MARY ANN, , ,		Date of Disbursement MM / DD / YYYY 02 / 16 / 2021	
Mailing Address 6955 GREENWATER CIR		FEC Identification Number C [REDACTED] Transaction ID : B3A445CF02I Amount of Each Disbursement this Period 50.00	
City CASTLE ROCK	State CO	Zip Code 80108	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. VAN BUSKIRK, MARY ANN, , ,		Date of Disbursement MM / DD / YYYY 02 / 16 / 2021	
Mailing Address 6955 GREENWATER CIR		FEC Identification Number C [REDACTED] Transaction ID : BD51C4FF3I Amount of Each Disbursement this Period 50.00	
City CASTLE ROCK	State CO	Zip Code 80108	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. VAN BUSKIRK, MARY ANN, , ,		Date of Disbursement MM / DD / YYYY 02 / 16 / 2021
Mailing Address 6955 GREENWATER CIR		FEC Identification Number C [REDACTED] Transaction ID : BBCD027108
City CASTLE ROCK	State CO	Zip Code 80108
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. VAN BUSKIRK, MARY ANN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 6955 GREENWATER CIR		FEC Identification Number C [REDACTED] Transaction ID : B81DFBF3F2
City CASTLE ROCK	State CO	Zip Code 80108
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. VAN EATON, LEONARD, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 2792 KATE BOND RD		FEC Identification Number C [REDACTED] Transaction ID : BCD597DD9;
City MEMPHIS	State TN	Zip Code 38133
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Amount of Each Disbursement this Period 35.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. VANDERFLUTE, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 13611 70TH AVE EA		FEC Identification Number C [REDACTED] Transaction ID : B850A65F2B: Amount of Each Disbursement this Period 2000.00
City PUYALLUP	State WA	Zip Code 98373-5273
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. VANDERMOLEN, LYNEIL, , ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2021
Mailing Address 22262 SW STAFFORD RD.		FEC Identification Number C [REDACTED] Transaction ID : BD2BF140DC Amount of Each Disbursement this Period 5.00
City TUALATIN	State OR	Zip Code 97062
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. VAUGHAN, NGAT, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 6748 NC HWY 210		FEC Identification Number C [REDACTED] Transaction ID : BDE4D474Ee Amount of Each Disbursement this Period 5.00
City SMITHFIELD	State NC	Zip Code 27577
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2010.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VAZQUEZ, LISA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11220 SW 136 STREET

City MIAMI State FL Zip Code 33176

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE6BBA4F66

Amount of Each Disbursement this Period: 25.00

Memo Item

B. VAZQUEZ, LISA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11220 SW 136 STREET

City MIAMI State FL Zip Code 33176

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B902376F8FC

Amount of Each Disbursement this Period: 25.00

Memo Item

C. VAZQUEZ, LISA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11220 SW 136 STREET

City MIAMI State FL Zip Code 33176

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA0F7BC752

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VAZQUEZ, LISA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11220 SW 136 STREET

City MIAMI State FL Zip Code 33176

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2ED173E44

Amount of Each Disbursement this Period: 25.00

Memo Item

B. VEECH, CHERYL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2500 N COUNTY ROAD 725 W

City WEST BADEN SPRINGS State IN Zip Code 47469

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B5EF2B2CBE

Amount of Each Disbursement this Period: 15.00

Memo Item

C. VELAZQUEZ, JOSE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 40 HUMMINGBIRD LANE

City HENDERSON State NV Zip Code 89014

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2021

FEC Identification Number: C

Transaction ID : B553C649C3

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. VELIE, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address P.O. BOX 1684		FEC Identification Number C [REDACTED] Transaction ID : BBF2EEE943 Amount of Each Disbursement this Period 15.00	
City OZARK	State MO	Zip Code 65721	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. VESTAL, LINPAUL, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 581 N CRAWFORD AVE SPC 86		FEC Identification Number C [REDACTED] Transaction ID : BCEB46CF40 Amount of Each Disbursement this Period 25.00	
City DINUBA	State CA	Zip Code 93618	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. VIAHAGAR, STEPHANIE, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2936 PINE VIEW DR		FEC Identification Number C [REDACTED] Transaction ID : B69867D5D2 Amount of Each Disbursement this Period 35.00	
City SPRING VALLEY	State OH	Zip Code 45370	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VILLARREAL, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11522 BAKERSFIELD PASS

City SAN ANTONIO State TX Zip Code 78245

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BE69204617E

Amount of Each Disbursement this Period: 35.00

Memo Item

B. VILLARTA, ROSALINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5097 BELLA COLLINA STREET

City OCEANSIDE State CA Zip Code 92056

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B16CDFC172

Amount of Each Disbursement this Period: 35.00

Memo Item

C. VITTITOW, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1510 MONKS RD

City NEW HAVEN State KY Zip Code 40051

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B1C297D31F

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. VITTITOW, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1510 MONKS RD

City NEW HAVEN State KY Zip Code 40051

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B7E97AE44F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. VOORHEES, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6738 NORTH 79TH PLACE

City SCOTTSDALE State AZ Zip Code 85250

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BA2C599F3A

Amount of Each Disbursement this Period: 50.00

Memo Item

C. VORCE, JEANETTE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 46471 DIAMOND SHOALS DR PO BOX 566

City BUXTON State NC Zip Code 27920

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BBA5C8ADE

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WADE, DEAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 5 ACR 1035		FEC Identification Number C [REDACTED] Transaction ID : BE7E86A23D Amount of Each Disbursement this Period 25.00
City GREER	State AZ	Zip Code 85927
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WADE, DEAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 5 ACR 1035		FEC Identification Number C [REDACTED] Transaction ID : BE2DF25BDE Amount of Each Disbursement this Period 25.00
City GREER	State AZ	Zip Code 85927
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WAKAZURU, MARILYN, NANCY, ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 23051 MILITARY RD S 3802		FEC Identification Number C [REDACTED] Transaction ID : B8043ED63E Amount of Each Disbursement this Period 35.00
City KENT	State WA	Zip Code 98032
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WAKEEN, KEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4255 GULF SHORE BLVD N

City NAPLES State FL Zip Code 34103

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 18 / 2021

FEC Identification Number: C

Transaction ID : B4EDD43978

Amount of Each Disbursement this Period: 5.00

Memo Item

B. WALKER, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14646 COUNTY RD 22

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B417B229E9F

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WALSTON, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2797 BEN MAC RD

City ORANGE State TX Zip Code 77632

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BE30602C97

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WALSTON, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2797 BEN MAC RD		FEC Identification Number C [REDACTED]	
City ORANGE	State TX	Zip Code 77632	Transaction ID : BDCCBDDA1
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. WALSTON, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2797 BEN MAC RD		FEC Identification Number C [REDACTED]	
City ORANGE	State TX	Zip Code 77632	Transaction ID : BF107EB7F0
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. WALSTON, RICHARD, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2797 BEN MAC RD		FEC Identification Number C [REDACTED]	
City ORANGE	State TX	Zip Code 77632	Transaction ID : B8A7A94F8E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WALSTON, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2797 BEN MAC RD

City ORANGE State TX Zip Code 77632

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BF17257C4B!**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WALSTON, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2797 BEN MAC RD

City ORANGE State TX Zip Code 77632

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **B723B6749A!**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. WALTERS, BRUCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 133 HENRY RD

City WEST MONROE State LA Zip Code 71291

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : **BCD4AD0C4**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 120.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WANG, KAI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10301 CYPRESS LAKES DR

City JACKSONVILLE State FL Zip Code 32256

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : BA3513297F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WANG, KAI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10301 CYPRESS LAKES DR

City JACKSONVILLE State FL Zip Code 32256

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C

Transaction ID : BEA0C9091D

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WANTJE, LOIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2435 MONTPELIER RD.

City PUNTA GORDA State FL Zip Code 33983

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BE827134D4

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WANTJE, LOIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2435 MONTPELIER RD.

City PUNTA GORDA State FL Zip Code 33983

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BEEDECD12/

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WARD, AL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16256 W STARRY SKY

City SURPRISE State AZ Zip Code 85474

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2021

FEC Identification Number: C

Transaction ID : BDF09ECAA1

Amount of Each Disbursement this Period: 35.00

Memo Item

C. WARD, KAY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 307 23 AVE NW

City WATERTOWN State SD Zip Code 57201

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BA16FEC8D1

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WARREN, CHRISTINE, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 601 EAST YOUNG ST B		FEC Identification Number C [REDACTED] Transaction ID : BFB942E3D8 Amount of Each Disbursement this Period 25.00
City ELMA	State WA	Zip Code 98541
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WASSON, JOHN, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 189 ROCKY STAR ST.		FEC Identification Number C [REDACTED] Transaction ID : BEC030C3E2 Amount of Each Disbursement this Period 50.00
City HENDERSON	State NV	Zip Code 89012
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WATSON, DALE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 1225 BARNES DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BAA16C0AD Amount of Each Disbursement this Period 25.00
City WARMINSTER	State PA	Zip Code 18974
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WATSON, DALE, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address 1225 BARNES DRIVE		FEC Identification Number C [REDACTED] Transaction ID : BF799FEC8C Amount of Each Disbursement this Period [REDACTED] 25.00
City WARMINSTER	State PA	Zip Code 18974
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WATT, RANDALL, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021
Mailing Address 3010 FISHING FORD ROAD		FEC Identification Number C [REDACTED] Transaction ID : B61A3A29B0! Amount of Each Disbursement this Period [REDACTED] 25.00
City PETERSBURG	State TN	Zip Code 37144
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WATTS, LARRY, F, , SR		Date of Disbursement MM / DD / YYYY 05 / 07 / 2021
Mailing Address 332 ROOSEVELT DR		FEC Identification Number C [REDACTED] Transaction ID : B5E3936A14 Amount of Each Disbursement this Period [REDACTED] 100.00
City SPRINGFIELD	State OH	Zip Code 45503
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 150.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEATHERBY, STEVE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5583 W. PHILLIPS MILL ROAD

City DOUGLASVILLE State GA Zip Code 30135

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B98EC4F63E

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WEATHERLY, ROBERT, N, ,

Full Name (Last, First, Middle Initial)

Mailing Address 378 OLD LAURINBURG RD

City HAMLET State NC Zip Code 28345

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2021

FEC Identification Number: C

Transaction ID : B70820695B7

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WEATHERLY, ROBERT, N, ,

Full Name (Last, First, Middle Initial)

Mailing Address 378 OLD LAURINBURG RD

City HAMLET State NC Zip Code 28345

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2021

FEC Identification Number: C

Transaction ID : B93338A7BE

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEATHERLY, ROBERT, N, ,

Full Name (Last, First, Middle Initial)

Mailing Address 378 OLD LAURINBURG RD

City HAMLET State NC Zip Code 28345

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BBA382DF4F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WEATHERLY, ROBERT, N, ,

Full Name (Last, First, Middle Initial)

Mailing Address 378 OLD LAURINBURG RD

City HAMLET State NC Zip Code 28345

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B700AC231A

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WEBBER, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 226 WILLIAMS AVE

City BUFFALO State WY Zip Code 82834-2224

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BB4AFD118E

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WEBBER, LINDA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 226 WILLIAMS AVE		FEC Identification Number C [REDACTED]	
City BUFFALO	State WY	Zip Code 82834-2224	Transaction ID : B6F86B0F37
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 15.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. WEBBER, LINDA, , ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021	
Mailing Address 226 WILLIAMS AVE		FEC Identification Number C [REDACTED]	
City BUFFALO	State WY	Zip Code 82834-2224	Transaction ID : B5EDED924D
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. WEBER, DONALD, , ,		Date of Disbursement MM / DD / YYYY 01 / 12 / 2021	
Mailing Address 41 EL VIENTO		FEC Identification Number C [REDACTED]	
City PISMO BEACH	State CA	Zip Code 93449	Transaction ID : BC4CD5214E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 250.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes. 28a is checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Form A: WEBER, DONALD, , , . Includes fields for Full Name, Mailing Address (41 EL VIENTO), City (PISMO BEACH), State (CA), Zip Code (93449), Purpose of Disbursement (CONTRIBUTION REFUND), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/12/2021), FEC Identification Number, Transaction ID (BA4BE1329A), Amount of Each Disbursement (250.00), and Memo Item checkbox.

Form B: WEISS, DELORIS, , , . Includes fields for Full Name, Mailing Address (1007 APPLE TREE DRIVE), City (STUART), State (VA), Zip Code (24171), Purpose of Disbursement (CONTRIBUTION REFUND), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/24/2021), FEC Identification Number, Transaction ID (B5D7071A85), Amount of Each Disbursement (35.00), and Memo Item checkbox.

Form C: WEISS, DELORIS, , , . Includes fields for Full Name, Mailing Address (1007 APPLE TREE DRIVE), City (STUART), State (VA), Zip Code (24171), Purpose of Disbursement (CONTRIBUTION REFUND), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/24/2021), FEC Identification Number, Transaction ID (B0AA32BCF), Amount of Each Disbursement (35.00), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 320.00
TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WEISS, DELORIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1007 APPLE TREE DRIVE

City STUART State VA Zip Code 24171

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B6D4828833E

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WEISS, NITZA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 540, BARDINI DRIVE

City MELVILLE State NY Zip Code 11747

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B8C5FE6FAE

Amount of Each Disbursement this Period: 25.00

Memo Item

C. WELCH, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 102 NW 10TH CT.

City BOYNTON BEACH State FL Zip Code 33426

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B70156E025

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WELDON, JERRY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2110 DAVISON AVE

City RICHLAND State WA Zip Code 99354

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC2449817C

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WELLBORN, RAYMOND, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3440 LAUREL GREEN CT

City KENNESAW State GA Zip Code 30144

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B0B7A7004E

Amount of Each Disbursement this Period: 25.00

Memo Item

C. WELLS, KATHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3341 GLENHAVEN PL

City LINCOLN State NE Zip Code 68506

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B2565C6201

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 95.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WELLS, KATHY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3341 GLENHAVEN PL

City LINCOLN State NE Zip Code 68506

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B8CC711E79

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WERNER, KEITH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 223 CAHNT AVENUE

City BERLIN State NJ Zip Code 08009

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BD55F92B9F

Amount of Each Disbursement this Period: 100.00

Memo Item

C. WEYGANDT, DEBBIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1918 RANDOM OAKS DR

City ROCKWALL State TX Zip Code 75087

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2021

FEC Identification Number: C

Transaction ID : B3939506F9

Amount of Each Disbursement this Period: 75.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

210.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WHITE, BRETT, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021	
Mailing Address 7606 DEL REY LN		FEC Identification Number C [REDACTED] Transaction ID : BF583556C1f Amount of Each Disbursement this Period [REDACTED] 35.00	
City HOUSTON	State TX	Zip Code 77071	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. WHITMAN, DELOS, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 48 GALE HILL RD		FEC Identification Number C [REDACTED] Transaction ID : B1ECF56F58! Amount of Each Disbursement this Period [REDACTED] 25.00	
City WEST LEBANON	State NY	Zip Code 12195	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. WHITNEY, ROSEMARY, , ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 471 CHESTNUT STREET		FEC Identification Number C [REDACTED] Transaction ID : B387152949f Amount of Each Disbursement this Period [REDACTED] 25.00	
City NUTLEY	State NJ	Zip Code 07110	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 85.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WHITNEY, ROSEMARY, , ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 471 CHESTNUT STREET		FEC Identification Number C [REDACTED] Transaction ID : B52EF957957 Amount of Each Disbursement this Period 25.00	
City NUTLEY	State NJ	Zip Code 07110	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. WHITNEY, ROSEMARY, , ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021	
Mailing Address 471 CHESTNUT STREET		FEC Identification Number C [REDACTED] Transaction ID : B6973A39912 Amount of Each Disbursement this Period 25.00	
City NUTLEY	State NJ	Zip Code 07110	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. WIERAMA, ZUELLEN, , ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 140 NAPERVILLE RD		FEC Identification Number C [REDACTED] Transaction ID : BF45AC00EC Amount of Each Disbursement this Period 25.00	
City CLARENDON HILLS	State IL	Zip Code 60514	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

75.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with 28a checked.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial)

A. WILCOX, NANCY, , ,

Mailing Address 10921 TANGLEBERRY COURT

City CINCINNATI State OH Zip Code 45240

Purpose of Disbursement CONTRIBUTION REFUND

010

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date input: MM/DD/YYYY 03/25/2021

FEC Identification Number

C [Redacted]

Transaction ID : B7E9C72438I

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WILCOX, NANCY, , ,

Mailing Address 10921 TANGLEBERRY COURT

City CINCINNATI State OH Zip Code 45240

Purpose of Disbursement CONTRIBUTION REFUND

010

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date input: MM/DD/YYYY 03/25/2021

FEC Identification Number

C [Redacted]

Transaction ID : BF76D9E19FZ

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAM, GILL, , ,

Mailing Address 56 DENISE TERRACE

City FAIRFIELD State CT Zip Code 06824

Purpose of Disbursement CONTRIBUTION REFUND

010

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date input: MM/DD/YYYY 03/02/2021

FEC Identification Number

C [Redacted]

Transaction ID : B01F9A208B

Amount of Each Disbursement this Period

50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

[Redacted]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAM, GILL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 56 DENISE TERRACE

City FAIRFIELD State CT Zip Code 06824

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2021

FEC Identification Number: C

Transaction ID : BFE6733F73I

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WILLIAMS, CONSTANCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 21734 COUNTY ROAD 70

City EATON State CO Zip Code 80615

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BD1D99735BI

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WILLIAMS, JD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4316 OLD COURSE DRIVE

City CHARLOTTE State NC Zip Code 28277

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BA1AF3369F

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 135.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, KAETHE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 601

City KINGSPORT State TN Zip Code 37662

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BF7B6AE8C/

Amount of Each Disbursement this Period: 12.50

Memo Item

B. WILLIAMS, RANDOLPH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8836 SOUTH WILLOW STREET

City WEEDSPORT State NY Zip Code 13166

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BB1E0C1A73

Amount of Each Disbursement this Period: 5.00

Memo Item

C. WILLIAMS, ROY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3 SAVOY DRIVE

City LAKE SAINT LOUIS State MO Zip Code 63367

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : B60DED67FF

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 27.50

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIAMS, SUSAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14325 KOLMAR AVE

City MIDLOTHIAN State IL Zip Code 60445

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B968F990FB

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WILLIAMS, SUSAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14325 KOLMAR AVE

City MIDLOTHIAN State IL Zip Code 60445

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B47A1D8113

Amount of Each Disbursement this Period: 35.00

Memo Item

C. WILLIAMS, SUSAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14325 KOLMAR AVE

City MIDLOTHIAN State IL Zip Code 60445

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B690956B89

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WILLIAMS, SUSAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021	
Mailing Address 14325 KOLMAR AVE		FEC Identification Number C [REDACTED] Transaction ID : B2D3F33096f Amount of Each Disbursement this Period 35.00	
City MIDLOTHIAN	State IL	Zip Code 60445	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. WILLIS, JERRY, A, ,		Date of Disbursement MM / DD / YYYY 01 / 05 / 2021	
Mailing Address 230 PARK ARK		FEC Identification Number C [REDACTED] Transaction ID : B82D5BAA4D Amount of Each Disbursement this Period 20.00	
City LAWRENCE	State KS	Zip Code 66046	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. WILLIS, JODY, , ,		Date of Disbursement MM / DD / YYYY 01 / 12 / 2021	
Mailing Address 13534 WEST PROSPECT DR		FEC Identification Number C [REDACTED] Transaction ID : B52370FCBC Amount of Each Disbursement this Period 25.00	
City SUN CITY WEST	State AZ	Zip Code 85375	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILLIS, JOE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 655 GARNER ROAD

City LILBURN State GA Zip Code 30047

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : B6CC1C0634

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WILLIS, JOE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 655 GARNER ROAD

City LILBURN State GA Zip Code 30047

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BAD22C4A57

Amount of Each Disbursement this Period: 35.00

Memo Item

C. WILLIS, JOE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 655 GARNER ROAD

City LILBURN State GA Zip Code 30047

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : BB49339C6E

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILMA, HENDERSON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 730

City AIRWAY HEIGHTS State WA Zip Code 99001

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 17 / 2021

FEC Identification Number: C

Transaction ID : B6B2F30E20

Amount of Each Disbursement this Period: 75.00

Memo Item

B. WILSON, DAVE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 750 SYLVAN AVENUE 39

City MOUNTAIN VIEW State CA Zip Code 94041

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BF22AAD61D

Amount of Each Disbursement this Period: 10.00

Memo Item

C. WILSON, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11072 FM 3094

City SCURRY State TX Zip Code 75158

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B641F4F7A4

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WILSON, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11072 FM 3094

City SCURRY State TX Zip Code 75158

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B757090B2E

Amount of Each Disbursement this Period: 25.00

Memo Item

B. WINEBRENNER, DAVID, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7325 INVERNESS COMMONS

City FORT WAYNE State IN Zip Code 46804

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B9767E54C2E

Amount of Each Disbursement this Period: 25.00

Memo Item

C. WINEGAR, DEE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 460666

City LEEDS State UT Zip Code 84746

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B11ED4F58C

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WINEGAR, DEE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 460666

City LEEDS State UT Zip Code 84746

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B54E1A8E77

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WINGER, BOBBIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1361 INDIAN MOUND TRAIL

City VERO BEACH State FL Zip Code 32963

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 25 / 2021

FEC Identification Number: C

Transaction ID : BD252BAB2E

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WINTERS, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1479 WIMBLEDON PLACE

City SPRINGFIELD State OR Zip Code 97477

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 05 / 2021

FEC Identification Number: C

Transaction ID : BE14E20CB3

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOLFE, LLOYD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4535 S PIERSON ST.

City TERRE HAUTE State IN Zip Code 47802

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B175672D71C

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WOLLAM, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4900 HILLARD AVE

City LA CANADA FLINTRIDGE State CA Zip Code 91011

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2021

FEC Identification Number: C

Transaction ID : BFFCE89663I

Amount of Each Disbursement this Period: 34.96

Memo Item

C. WOLMARANS, THEO, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 215 WINDING LANE

City SAN ANTONIO State TX Zip Code 78231

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BB29B978EE

Amount of Each Disbursement this Period: 20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 104.96

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODALL, BILLY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8033 GERANIUM LN

City FORT WORTH State TX Zip Code 76123

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 08 / 2021

FEC Identification Number: C

Transaction ID : B855F0C75B

Amount of Each Disbursement this Period: 25.00

Memo Item

B. WOODARD, PHYLLIS, A, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1701 ORANGE TREE DR.

City EDGEWATER State FL Zip Code 32132

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B8B4CBDFC

Amount of Each Disbursement this Period: 25.00

Memo Item

C. WOODARD, PHYLLIS, A, ,

Full Name (Last, First, Middle Initial)

Mailing Address 1701 ORANGE TREE DR.

City EDGEWATER State FL Zip Code 32132

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B72AA89742

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOOD, MILTON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1082 KUBLI RD

City GRANTS PASS State OR Zip Code 97527

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B1C2C4CBF1

Amount of Each Disbursement this Period: 25.00

Memo Item

B. WOOD, ROSEMARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3871 SAINT ANDREWS LN. S

City SALEM State OR Zip Code 97302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B07CD6F9B2

Amount of Each Disbursement this Period: 15.00

Memo Item

C. WOOD, ROSEMARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3871 SAINT ANDREWS LN. S

City SALEM State OR Zip Code 97302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BC354C0EE4

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOOD, ROSEMARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3871 SAINT ANDREWS LN. S

City SALEM State OR Zip Code 97302

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : BB0F571FFA

Amount of Each Disbursement this Period: 15.00

Memo Item

B. WOODS, DONNA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2511, WINTER

City KINGSBURG State CA Zip Code 93631

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 12 / 2021

FEC Identification Number: C

Transaction ID : B2AF6735171

Amount of Each Disbursement this Period: 5.00

Memo Item

C. WOOD, SUSAN, A, ,

Full Name (Last, First, Middle Initial)

Mailing Address 15808 62ND PLACE NE

City KENMORE State WA Zip Code 98028

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2021

FEC Identification Number: C

Transaction ID : BB28E31B6/

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODUL, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 288 BARTLETT MESA RD

City RATON State NM Zip Code 87740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BB0F09362B**

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WOODUL, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 288 BARTLETT MESA RD

City RATON State NM Zip Code 87740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BA1F1C8735**

Amount of Each Disbursement this Period: 35.00

Memo Item

C. WOODUL, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 288 BARTLETT MESA RD

City RATON State NM Zip Code 87740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : **BAE74C1DC**

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WOODUL, CAROLYN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 288 BARTLETT MESA RD

City RATON State NM Zip Code 87740

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : BE592709134

Amount of Each Disbursement this Period: 35.00

Memo Item

B. WORTHAM, SHARON, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4917 LAKE SIDE CIR

City NORTH RICHLAND HILLS State TX Zip Code 76180

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2021

FEC Identification Number: C

Transaction ID : BB7DEB2FF7

Amount of Each Disbursement this Period: 25.00

Memo Item

C. WORTHINGTON, ROBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4703 LEWISHAM COURT

City RALEIGH State NC Zip Code 27612

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2021

FEC Identification Number: C

Transaction ID : BB3DE19ED

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. WORTHINGTON, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2021
Mailing Address 4703 LEWISHAM COURT		FEC Identification Number C [REDACTED] Transaction ID : B2E1A9D703
City RALEIGH	State NC	Zip Code 27612
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 10.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 010	

Full Name (Last, First, Middle Initial) B. WORTHINGTON, ROBERT, , ,		Date of Disbursement MM / DD / YYYY 04 / 14 / 2021
Mailing Address 4703 LEWISHAM COURT		FEC Identification Number C [REDACTED] Transaction ID : BDA45ACB82
City RALEIGH	State NC	Zip Code 27612
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 10.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 010	

Full Name (Last, First, Middle Initial) C. WOSTENBERG, LYLE, , ,		Date of Disbursement MM / DD / YYYY 01 / 28 / 2021
Mailing Address 1297 AIRPORT RD.		FEC Identification Number C [REDACTED] Transaction ID : B1C14901C5
City WORLAND	State WY	Zip Code 82401
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 35.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 010	

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

55.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WRANISCHAR, MARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2716 CHAFFIN LN

City MAGNOLIA State AR Zip Code 71753

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2021

FEC Identification Number: C

Transaction ID : B98303619E/

Amount of Each Disbursement this Period: 6000.00

Memo Item

B. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BED3967C9B

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BD2B8D760E

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B2403FFFA3

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BF2ED8A6C2

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BAFE5B181C

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BCD8766AD3

Amount of Each Disbursement this Period: 50.00

Memo Item

B. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B464F5FB54f

Amount of Each Disbursement this Period: 50.00

Memo Item

C. WRIGHT, CAROL, J., ,

Full Name (Last, First, Middle Initial)

Mailing Address 2646 MARTIN WAY

City LAKE OSWEGO State OR Zip Code 97034

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B66440C024;

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. WYATT, LENDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 365 ANDOVER DRUVE

City LEXINGTON State KY Zip Code 40502

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B0D72D9315

Amount of Each Disbursement this Period: 15.00

Memo Item

B. WYATT, LENDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 365 ANDOVER DRUVE

City LEXINGTON State KY Zip Code 40502

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2021

FEC Identification Number: C

Transaction ID : B173D712437

Amount of Each Disbursement this Period: 15.00

Memo Item

C. WYLIE, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6110 NEWCASTLE

City BELLAIRE State TX Zip Code 77401

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B7A717BE12

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YANDLE, ALI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 SNOWGOOSE CV

City GREENSBORO State NC Zip Code 27455

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : B5F45527C2f

Amount of Each Disbursement this Period: 15.00

Memo Item

B. YANDLE, ALI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 SNOWGOOSE CV

City GREENSBORO State NC Zip Code 27455

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2021

FEC Identification Number: C

Transaction ID : BACEBF0A27

Amount of Each Disbursement this Period: 15.00

Memo Item

C. YBARRA, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3279 WEST DESERT LILY DT

City LEHI State UT Zip Code 84043

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B5A944B826

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. YELLIN, ARTHUR, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 4 GOVERNORS COURT		FEC Identification Number C [REDACTED] Transaction ID : B0FCBA512E Amount of Each Disbursement this Period 50.00
City GREAT NECK	State NY	Zip Code 11023
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. YELLIN, ARTHUR, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 4 GOVERNORS COURT		FEC Identification Number C [REDACTED] Transaction ID : B1C1F5C5EC Amount of Each Disbursement this Period 50.00
City GREAT NECK	State NY	Zip Code 11023
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. YELLIN, ARTHUR, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 4 GOVERNORS COURT		FEC Identification Number C [REDACTED] Transaction ID : B02FD8C9F6 Amount of Each Disbursement this Period 50.00
City GREAT NECK	State NY	Zip Code 11023
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. YELTON, RONALD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12325 PADGETT COURT

City WALTON State KY Zip Code 41094

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : B6D1449288C

Amount of Each Disbursement this Period: 15.00

Memo Item

B. YOUNG, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3390 E BASELINE RD

City WHITE CLOUD State MI Zip Code 49349

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BAFB60D5C3

Amount of Each Disbursement this Period: 35.00

Memo Item

C. YOUNG, GARY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3390 E BASELINE RD

City WHITE CLOUD State MI Zip Code 49349

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2021

FEC Identification Number: C [REDACTED]

Transaction ID : BCC70FC0E1

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. YOUNG, GARY, , ,		Date of Disbursement MM / DD / YYYY 01 / 27 / 2021
Mailing Address 3390 E BASELINE RD		FEC Identification Number C [REDACTED] Transaction ID : B8F95F22ED Amount of Each Disbursement this Period [REDACTED] 35.00
City WHITE CLOUD	State MI	Zip Code 49349
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ZARCONE, FRANK, , ,		Date of Disbursement MM / DD / YYYY 01 / 06 / 2021
Mailing Address 918 WENTWORTH COURT		FEC Identification Number C [REDACTED] Transaction ID : B5E75FCE36I Amount of Each Disbursement this Period [REDACTED] 35.00
City ALPHARETTA	State GA	Zip Code 30022
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED] Transaction ID : B6C45B2B2F Amount of Each Disbursement this Period [REDACTED] 100.00
City TROY	State MI	Zip Code 48098
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 170.00

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED]	
City TROY	State MI	Zip Code 48098	Transaction ID : BA625ECB2E
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 25.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED]	
City TROY	State MI	Zip Code 48098	Transaction ID : BB08DB6BDC
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 35.00
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED]	
City TROY	State MI	Zip Code 48098	Transaction ID : BC89A4151C
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type 010	Amount of Each Disbursement this Period 12.50
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	72.50
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED] Transaction ID : BD6EF506AD Amount of Each Disbursement this Period 25.00	
City TROY	State MI	Zip Code 48098	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED] Transaction ID : B83D73B40A Amount of Each Disbursement this Period 50.00	
City TROY	State MI	Zip Code 48098	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED] Transaction ID : BAE0DFF271 Amount of Each Disbursement this Period 35.00	
City TROY	State MI	Zip Code 48098	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED] Transaction ID : B16EF615C11 Amount of Each Disbursement this Period 50.00	
City TROY	State MI	Zip Code 48098	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED] Transaction ID : BA52FA7A03 Amount of Each Disbursement this Period 100.00	
City TROY	State MI	Zip Code 48098	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ZEMBRZUSKI, AUDRE, A., ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2021	
Mailing Address 2842 SHADYWOOD DR.		FEC Identification Number C [REDACTED] Transaction ID : B45AA7AD1 Amount of Each Disbursement this Period 50.00	
City TROY	State MI	Zip Code 48098	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZENOR, CINDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2572 N STOKESBERRY PLACE

City MERIDIAN State ID Zip Code 83646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BD2DA6CBD**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. ZENOR, CINDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2572 N STOKESBERRY PLACE

City MERIDIAN State ID Zip Code 83646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **B1DAD89311**

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ZENOR, CINDY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2572 N STOKESBERRY PLACE

City MERIDIAN State ID Zip Code 83646

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **BF6A9384B1**

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZENOR, CINDY, , ,			Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2572 N STOKESBERRY PLACE			FEC Identification Number C [REDACTED] Transaction ID : BA3416CEEA Amount of Each Disbursement this Period [REDACTED] 50.00	
City MERIDIAN	State ID	Zip Code 83646	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
Full Name (Last, First, Middle Initial) B. ZENOR, CINDY, , ,			Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2572 N STOKESBERRY PLACE			FEC Identification Number C [REDACTED] Transaction ID : B6483D745B Amount of Each Disbursement this Period [REDACTED] 50.00	
City MERIDIAN	State ID	Zip Code 83646	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
Full Name (Last, First, Middle Initial) C. ZENOR, CINDY, , ,			Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 2572 N STOKESBERRY PLACE			FEC Identification Number C [REDACTED] Transaction ID : BA06D5516A Amount of Each Disbursement this Period [REDACTED] 50.00	
City MERIDIAN	State ID	Zip Code 83646	Category/Type 010	
Purpose of Disbursement CONTRIBUTION REFUND			Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 150.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZENOR, CINDY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 2572 N STOKESBERRY PLACE		FEC Identification Number C [REDACTED] Transaction ID : B1BE06B841. Amount of Each Disbursement this Period 50.00
City MERIDIAN	State ID	Zip Code 83646
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ZENOR, CINDY, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 2572 N STOKESBERRY PLACE		FEC Identification Number C [REDACTED] Transaction ID : B7FE38DB63: Amount of Each Disbursement this Period 50.00
City MERIDIAN	State ID	Zip Code 83646
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ZEZZO, ERIN, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 3570 WELLSFORD LANE		FEC Identification Number C [REDACTED] Transaction ID : BCE7F0E2A: Amount of Each Disbursement this Period 50.00
City DOYLESTOWN	State PA	Zip Code 18902
Purpose of Disbursement CONTRIBUTION REFUND		Category/Type 010
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZHANG, YUZHI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14021 E MAPLEWOOD PL

City CENTENNIAL State CO Zip Code 80111

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B3B5C93F02!

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ZHANG, YUZHI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14021 E MAPLEWOOD PL

City CENTENNIAL State CO Zip Code 80111

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2021

FEC Identification Number: C

Transaction ID : B81F986827C

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ZHITOMIRSKY, EMANUIL, O., ,

Full Name (Last, First, Middle Initial)

Mailing Address 402 PARADISE RD APT 3Q

City SWAMPSCOTT State MA Zip Code 01907

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : BB4ED2F3C!

Amount of Each Disbursement this Period: 15.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZHITOMIRSKY, EMANUIL, O., ,		Date of Disbursement MM / DD / YYYY 05 / 19 / 2021
Mailing Address 402 PARADISE RD APT 3Q		FEC Identification Number C [REDACTED] Transaction ID : BF22449362A Amount of Each Disbursement this Period 15.00
City SWAMPSCOTT	State MA	Zip Code 01907
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BE8030BBDA Amount of Each Disbursement this Period 25.00
City GRAND RAPIDS	State MI	Zip Code 49546
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BBAA674D2! Amount of Each Disbursement this Period 25.00
City GRAND RAPIDS	State MI	Zip Code 49546
Purpose of Disbursement CONTRIBUTION REFUND		010 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZIMMERMANN, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7380 BISCAYNE QAY SE

City GRAND RAPIDS State MI Zip Code 49546

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B97BDE4060

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ZIMMERMANN, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7380 BISCAYNE QAY SE

City GRAND RAPIDS State MI Zip Code 49546

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : BE364908C6/

Amount of Each Disbursement this Period: 25.00

Memo Item

C. ZIMMERMANN, LINDA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7380 BISCAYNE QAY SE

City GRAND RAPIDS State MI Zip Code 49546

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : B60D342237/

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B555F292929 Amount of Each Disbursement this Period 25.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BB6AC9D5FE Amount of Each Disbursement this Period 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BC01A21267 Amount of Each Disbursement this Period 25.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BD6C7222EC Amount of Each Disbursement this Period [REDACTED] 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BD4C0E762FI Amount of Each Disbursement this Period [REDACTED] 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BAB091074C Amount of Each Disbursement this Period [REDACTED] 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 105.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B35C41ABF8 Amount of Each Disbursement this Period 25.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BF3AC2043D Amount of Each Disbursement this Period 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B421BF906C Amount of Each Disbursement this Period 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B9ED059364 Amount of Each Disbursement this Period 50.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BCA8D0D6C5 Amount of Each Disbursement this Period 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B4979BA644 Amount of Each Disbursement this Period 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B2BDD52FF1 Amount of Each Disbursement this Period [REDACTED] 25.00
City GRAND RAPIDS	State MI	
Purpose of Disbursement CONTRIBUTION REFUND	Zip Code 49546	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B3D7852A07f Amount of Each Disbursement this Period [REDACTED] 35.00
City GRAND RAPIDS	State MI	
Purpose of Disbursement CONTRIBUTION REFUND	Zip Code 49546	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B826187B1A Amount of Each Disbursement this Period [REDACTED] 50.00
City GRAND RAPIDS	State MI	
Purpose of Disbursement CONTRIBUTION REFUND	Zip Code 49546	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 110.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B333117E3C Amount of Each Disbursement this Period 25.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B6D3509148E Amount of Each Disbursement this Period 25.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BF25EF1109 Amount of Each Disbursement this Period 50.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : BC976D9924/ Amount of Each Disbursement this Period [REDACTED] 35.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B55CEFABA/ Amount of Each Disbursement this Period [REDACTED] 25.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ZIMMERMANN, LINDA, , ,		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021	
Mailing Address 7380 BISCAYNE QAY SE		FEC Identification Number C [REDACTED] Transaction ID : B1B678FB55 Amount of Each Disbursement this Period [REDACTED] 25.00	
City GRAND RAPIDS	State MI	Zip Code 49546	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 85.00
[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ZIZIC, BARBARA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1235 S PRAIRIE AVE
1001

City CHICAGO State IL Zip Code 60605

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 28 / 2021

FEC Identification Number: C

Transaction ID : B0818C7DBA

Amount of Each Disbursement this Period: 35.00

Memo Item

B. ZUREK, LAWRENCE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2333 S 6TH STREET

City MILWAUKEE State WI Zip Code 53215

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 25 / 2021

FEC Identification Number: C

Transaction ID : B61579E2E95

Amount of Each Disbursement this Period: 50.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period: 85.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	112844.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. ALEXPROP LLC

Full Name (Last, First, Middle Initial)

Mailing Address 9060 FIG STREET

City ARVADA State CO Zip Code 80005

Purpose of Disbursement CAREY ACCOUNT: RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2021

FEC Identification Number: C

Transaction ID : B59546F63AI

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 117 N SAINT ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CAREY ACCOUNT: MGMT OF ONLINE CAMPAIGN TO STOP JOE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2021

FEC Identification Number: C

Transaction ID : B5C7CB19C8

Amount of Each Disbursement this Period: 4794.13

Memo Item

C. DELANO, JOSHUA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1415 S. VOSS SUITE 110-329

City HOUSTON State TX Zip Code 77057

Purpose of Disbursement CAREY ACCOUNT: PR SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2021

FEC Identification Number: C

Transaction ID : BC2E8563C9

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6044.13

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. PAC MANAGEMENT SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT: BEST EFFORTS MAILERS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2021

FEC Identification Number

C
Transaction ID : **BF2C91B66E**
Amount of Each Disbursement this Period
6359.36

Memo Item

B. PAC MANAGEMENT SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT: COMPLIANCE SERVICES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2021

FEC Identification Number

C
Transaction ID : **BA7554B817I**
Amount of Each Disbursement this Period
4500.00

Memo Item

C. PAC MANAGEMENT SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 950 N WASHINGTON ST.
STE 105

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT: PAYROLL, BENEFITS & SERVICES FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2021

FEC Identification Number

C
Transaction ID : **B29002FB93**
Amount of Each Disbursement this Period
9778.61

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

20637.97

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. HARVEY, TED, , ,		Date of Disbursement MM / DD / YYYY 03 / 08 / 2021
Mailing Address 3010 WYECLIFF LANE		FEC Identification Number C [REDACTED] Transaction ID : B6C80B5203I Amount of Each Disbursement this Period 4000.00
City HIGHLANDS RANCH	State CO	Zip Code 80126
Purpose of Disbursement CAREY ACCOUNT: PAYROLL		012 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BANGHART, CHAD, , ,		Date of Disbursement MM / DD / YYYY 03 / 08 / 2021
Mailing Address 4428 TANEY AVE APT. 402		FEC Identification Number C [REDACTED] Transaction ID : B24D8373AFI Amount of Each Disbursement this Period 3125.00
City ALEXANDRIA	State VA	Zip Code 22304
Purpose of Disbursement CAREY ACCOUNT: PAYROLL		012 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAC MANAGEMENT SERVICES		Date of Disbursement MM / DD / YYYY 04 / 27 / 2021
Mailing Address 950 N WASHINGTON ST. STE 105		FEC Identification Number C [REDACTED] Transaction ID : B16301EE77I Amount of Each Disbursement this Period 1719.52
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement CAREY ACCOUNT: CAGING SERVICES		012 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1719.52
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. POLITICAL.LAW PLLC		Date of Disbursement MM / DD / YYYY 01 / 13 / 2021
Mailing Address 441 NORTH LEE STREET SUITE 300		FEC Identification Number C [REDACTED] Transaction ID : BBF2789A56I Amount of Each Disbursement this Period 11669.09
City ALEXANDRIA	State VA	Zip Code 22314-2301
Purpose of Disbursement CAREY ACCOUNT: LEGAL SERVICES		012 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. POLITICAL.LAW PLLC		Date of Disbursement MM / DD / YYYY 02 / 19 / 2021
Mailing Address 441 NORTH LEE STREET SUITE 300		FEC Identification Number C [REDACTED] Transaction ID : BD448E30AC Amount of Each Disbursement this Period 500.00
City ALEXANDRIA	State VA	Zip Code 22314-2301
Purpose of Disbursement CAREY ACCOUNT: 1099 PREP		012 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. X STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 01 / 08 / 2021
Mailing Address 499 EVERNIA ST UNIT 603		FEC Identification Number C [REDACTED] Transaction ID : B79B1F2FB8 Amount of Each Disbursement this Period 1110.00
City WEST PALM BEACH	State FL	Zip Code 33401-5465
Purpose of Disbursement CAREY ACCOUNT: SOCIAL MEDIA CONSULTING		012 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	13279.09
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

Full Name (Last, First, Middle Initial) A. X STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y Y Y 03 / 11 / 2021	
Mailing Address 499 EVERNIA ST UNIT 603			
City WEST PALM BEACH	State FL	Zip Code 33401-5465	
Purpose of Disbursement CAREY ACCOUNT: SOCIAL MEDIA CONSULTING		012	FEC Identification Number C [REDACTED] Transaction ID : BEEA872AAE Amount of Each Disbursement this Period [REDACTED] 2235.00
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. X STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 07 / 2021	
Mailing Address 499 EVERNIA ST UNIT 603			
City WEST PALM BEACH	State FL	Zip Code 33401-5465	
Purpose of Disbursement CAREY ACCOUNT: SOCIAL MEDIA CONSULTING		012	FEC Identification Number C [REDACTED] Transaction ID : B9C5856B251 Amount of Each Disbursement this Period [REDACTED] 1835.00
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. X STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y Y Y 05 / 07 / 2021	
Mailing Address 499 EVERNIA ST UNIT 603			
City WEST PALM BEACH	State FL	Zip Code 33401-5465	
Purpose of Disbursement CAREY ACCOUNT: SOCIAL MEDIA CONSULTING		012	FEC Identification Number C [REDACTED] Transaction ID : BFBF52C1A! Amount of Each Disbursement this Period [REDACTED] 1120.00
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)..... ▶

5190.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. X STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 499 EVERNIA ST
UNIT 603

City WEST PALM BEACH State FL Zip Code 33401-5465

Purpose of Disbursement CAREY ACCOUNT: SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2021

FEC Identification Number: C

Transaction ID : B7719BE1B5

Amount of Each Disbursement this Period: 995.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	995.00
TOTAL This Period (last page this line number only).....▶	47865.71

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 3009 OF 3012
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN SOLUTIONS			Nature of Debt (Purpose): I/E DEBT PAYMENT: ONLINE VOTER CONTACT: SEE EST TRANS ID:...40F4A38
Mailing Address 117 N SAINT ASAPH ST.			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="88708.03"/>	Transaction ID : D36B2467DE85641BD85B	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="88708.03"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN SOLUTIONS			Nature of Debt (Purpose): I/E DEBT PAYMENT: ONLINE VOTER CONTACT: SEE EST TRANS ID:...4BE3AFE
Mailing Address 117 N SAINT ASAPH ST.			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="43303.45"/>	Transaction ID : DF8A89EB4AA874D79A79	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="43303.45"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) THE COMMITTEE TO DEFEAT THE PRESIDENT
FEC IDENTIFICATION NUMBER C C00544767

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN HQ
Mailing Address P.O. BOX 257
City BROOKLYN State IA Zip Code 52211
Purpose of Expenditure PMT FOR EST FROM 12/26/2020. PHONE VOTER CONTACT: SEE EST TRANS ID#:....4EDF9D7
Name of Federal Candidate: LOEFFLER, KELLY, , ,
Calendar Year-To-Date Per Election for Office Sought 32837.28
Date of Public Distribution/Dissemination 12/26/2020
Amount 30622.28
Transaction ID : ED7E118051F15460D995
Date of Disbursement or Obligation 01/05/2021
Office Sought: Senate State: GA
Disbursement For: Other (specify) RUNOFF

Full Name of Payee CAMPAIGN SOLUTIONS
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure PMT FOR EST FROM 12/31/2020. ONLINE VOTER CONTACT: SEE EST TRANS ID#:...40F4A38
Name of Federal Candidate: LOEFFLER, KELLY, , ,
Calendar Year-To-Date Per Election for Office Sought 87243.76
Date of Public Distribution/Dissemination 12/31/2020
Amount 50402.48
Transaction ID : E13822D2CAA5C492C82D
Date of Disbursement or Obligation 02/18/2021
Office Sought: Senate State: GA
Disbursement For: Other (specify) RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures 81024.76
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HARVEY, TED, , ,

[Electronically Filed]

Date 07/28/2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) THE COMMITTEE TO DEFEAT THE PRESIDENT
FEC IDENTIFICATION NUMBER C C00544767

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee CAMPAIGN SOLUTIONS
Mailing Address 117 N SAINT ASAPH ST.
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure PMT FOR EST FROM 12/31/2020. ONLINE VOTER CONTACT: SEE EST TRANS ID#...40F4A38
Date of Public Distribution/Dissemination 12/31/2020
Amount 4004.00
Transaction ID : E3144753D1DAD42F7B88
Date of Disbursement or Obligation 02/18/2021
Name of Federal Candidate: LOEFFLER, KELLY, , , Support
Office Sought: Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 87243.76
Disbursement For: Other (specify) RUNOFF

Full Name of Payee X STRATEGIES LLC
Mailing Address 499 EVERNIA ST UNIT 603
City WEST PALM BEACH State FL Zip Code 33401-5465
Purpose of Expenditure CAREY ACCOUNT: SOCIAL MEDIA CONSULTING
Date of Public Distribution/Dissemination 01/04/2021
Amount 1107.50
Transaction ID : EE949B1278A0A4822808
Date of Disbursement or Obligation 01/05/2021
Name of Federal Candidate: LOEFFLER, KELLY, , , Support
Office Sought: Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 2215.00
Disbursement For: Other (specify) RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures 5111.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HARVEY, TED, , ,

[Electronically Filed]

Date 07/28/2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
THE COMMITTEE TO DEFEAT THE PRESIDENT
FEC IDENTIFICATION NUMBER
C C00544767

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee X STRATEGIES LLC
Mailing Address 499 EVERNIA ST UNIT 603
City WEST PALM BEACH State FL Zip Code 33401-5465
Purpose of Expenditure CAREY ACCOUNT: SOCIAL MEDIA CONSULTING
Name of Federal Candidate: PERDUE, DAVID, ,
Calendar Year-To-Date Per Election for Office Sought 2215.00
Date of Public Distribution/Dissemination 01 / 04 / 2021
Amount 1107.50
Transaction ID : ED239BF18014B45F0942
Date of Disbursement or Obligation 01 / 05 / 2021
Office Sought: Senate State: GA
Disbursement For: Other (specify) RUNOFF

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Name of Federal Candidate:
Office Sought:
State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 1107.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 87243.76

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HARVEY, TED, ,

[Electronically Filed]

Date 07 / 28 / 2021

Signature